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[ নূতন হোমিওপ্যাথিক পুস্তক । ]

হোমিওপেথিক

# চিকিৎসা-সার ।

মূল্য ২।০ টাকা, ডাকমাণ্ডল স্বতন্ত্র ।

গৃহস্থ এবং চিকিৎসকমাত্রেই এই পুস্তক রাখা উচিত । ইহাতে নূতন ঔষধ সকল সম্মিলিত হইয়াছে এবং ঔষধ সকলের প্রভেদও অতি সরলভাবে ও সংক্ষেপে বর্ণিত হইয়াছে । অধিক কি, এই পুস্তকের সাহায্যে প্রায় সকল রোগেরই চিকিৎসা অতি সহজেই করা যায় ।

কলেরা বা

## ওলাউঠা-চিকিৎসা ।

এই পুস্তকে ওলাউঠার ইতিহাস, রোগতত্ত্ব, চিকিৎসা, পথ্যাদির নিয়ম প্রভৃতি সকল বিষয়ই বিস্তৃত ভাবে ও সরল ভাষায় লিখিত হইয়াছে ; এবং ডাক্তার বিহারিলাল ভাট্টা, প্রতাপচন্দ্র মজুমদার ও জিতেন্দ্রনাথ মজুমদার মহাশয়দিগের অভিজ্ঞতাও সম্মিলিত হইয়াছে । কয়েকটি রোগীর চিকিৎসা-বিবরণ দিয়া ঔষধ সকলের ব্যবহার বুঝিবার পক্ষে বিশেষ সুবিধাও করিয়া দেওয়া হইয়াছে ।

মূল্য ২।০ টাকা, ডাকমাণ্ডল স্বতন্ত্র ।

পুস্তক দুইখানি কলিকাতা, ২০৩১ নং কর্ণওয়ালিস স্ট্রীটে প্রাপ্য ।

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মফস্বলের অর্ডার বিশেষ যত্নেব সহিত অতি সত্বর পাঠাইয়া থাকি । কলেরা ও গৃহ-চিকিৎসার ঔষধপূর্ণ বাস্ক—কৌটা ফেলা যন্ত্র ও পুস্তকসহ যথাক্রমে ১২, ২৪, ৩০, ৪৮, ৬০, ও ১০৪ শিশির মূল্য যথাক্রমে ২।০, ৩।০, ৪.০, ৬.০, ৭।০ ও ১২।০ টাকা, মাণ্ডলাদি স্বতন্ত্র । বিজ্ঞাপনের আড়ম্বর দেখাইতে অনিচ্ছুক, একবার পরীক্ষা প্রার্থনীয় ।

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**A Monthly Journal of Homeopathy and Collateral Sciences**

EDITED BY

P. C. MAJUMDAR, M. D., & J. N. MAJUMDAR, M. D.

*The Objects of this Journal are :—*

1. The diffusion of the knowledge of Homeopathy in our country and teaching a strict adherence to Hahnemannian practice.
2. The development of Homeopathic Practice of Medicine and Materia Medica, especially the proving and clinical application of indigenous drugs of the country.
3. Social Science and Hygiene also occupy a place in this Journal.
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A monthly journal of Homeopathy and  
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"The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine."

—HAHNEMANN.

VOL. XXVIII. ]

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[ No. 1.

## NEW YEAR.

Another year has come and gone. The last year saw us in great difficulty. The world war kept us all paralysed. We thank God that we were able to continue our work inspite of all the difficulties. With the New Year the Indian Homeopathic Review launches on the 28th year of its existence. We extend our cordial greetings to our numerous readers and subscribers once again. With the cessation of hostilities and the establishment of peace, we hope to renew our work in much better style in the near future. The Calcutta Homeopathic Hospital and the Calcutta School of Homeopathy have continued their work as usual. But of course there have been difficulties with these institutions as with everything else during these trying times.

•



The new year finds the Calcutta Homeopathic Society in much better shape once again. Dr. Ashwini Kumar Bhattacharya, one of the prime movers of the organisation at its foundation, has returned to Calcutta and has become the Secretary. We expect much from him. Dr. P. C. Majumdar the doyen of the homeopathic profession of India, is the new President.

With such auspicious auguries we begin the work of the New Year.

### QUICK CURES:

P. C. MAJUMDAR, M. D.

Some people have an idea that Homeopathy can not cure cases quickly. This notion is entirely false. Cases of typhoid fever and some other diseases require time for their cure and that is seen in every system of medicine. Allopaths take time for the termination of these conditions, but no body objects to that, only when a homeopath wants time they make remarks like the above. One of Hahnemann's first propositions in his Organon is speedy and permanent cure and this contention is always proved by facts. We show it here by giving some cases from our practice.

#### I.

A young man of 30 had an attack of fever with diarrhoea, tympanitis, gurgling and pain in abdomen. Temperature getting higher and higher every day till it reached 104 F., I was called and found it to be a case of typhoid, as other symptoms showed themselves.

I gave Baptisia 30 three times a day and no food or drink except pure water. He was progressing fairly from the next day. From the urgent request of his relatives I had to give him whey and barley water.

His abdominal condition grew worse. I stopped all food and continued Baptisia 30 in the same way. He made a good recovery in five days.

## II.

A baby aged 3 months, thin and puny, had an attack of diarrhoea and vomiting. An allopath was called and he diagnosed the case as enterocolitis and thought it to be a fatal case. I saw the baby, symptoms were exactly those of Chamomilla. Yellowish green stools, much colic relieved by carrying the child about, tympanitis, vomiting of greenish stuff, the child irritable and peevish. I gave Chamom. c.m. one dose. He was better for twenty four hours when his mother gave him milk. There was a relapse and I repeated another dose of the same and quick cure was the result. He required no more medicine.

## III.

An elderly gentleman had bleeding from the nose suddenly one summer day. He was plugged and medicines (allopathic) taken without any benefit. He used to lose about ten ounces of blood every day. I was called and gave Erigeron c. 3x every four hours. Bleeding was less but did not stop altogether. I continued the medicine, but no better results.

I then gave *Melilotus alb* 3x three times and it had the desired effect of stopping the bleeding at once.

#### IV.

A robust young man had an attack of fever with high temperature, pain in the body, vomiting of bile and intense headache. There was good deal of shivering. He got *Rhus* 30 three doses and that stopped the fever. One day he was better but the next day at about 8 o'clock he had more shivering, hand and feet icy cold, constant vomiting of bile and extreme tenderness of the whole body, and much thirst. *Eupat. perf.* 30 gave a very good result. No fever the whole next day, but at 4 p. m. had shivering and all the symptoms in a less degree. *Eupat. Perf.* 30.

Next morning at 8 A. M. he had fever again, but I gave him nothing. *Nux vom.* was thought of but not given. In the evening fever stopped with copious perspiration. I thought of *Chinin sulph*, but did not give it. I then administered a dose of *Eupat. perf. c. m.* and there was no more fever.

#### V.

A young lady had carbuncular abscess in her thigh ; it was extremely painful, surrounding areola red and hot. There was slight fever. Urine was analysed and no sugar or albumen was found. *Belladon* 200, two doses, reduced the swelling, pain and redness and she was declared cured. Another abscess came on and it took head and a big suppuration. *Hepar s.* 30, 3 times a day, helped to burst it and she got well. In

this latter abscess the family physician—an allopathic doctor said, if you don't operate in time septic infection would be the result and the lady would die. I assured him that our medicine would disperse it or the abscess would burst. He was surprised to see the effect of my medicine the next day when the abscess was emitting copious pus. The lady told me that her husband, a youngman, lost his life last year from similar abscesses, operated on by allopathic doctors where some injections were also made. Had she known the efficacy of our medicines, she would certainly have had the benefit of our medicine in his case also and probably such fatal effect would not have taken place.

There is no doubt about the efficacy of homeopathic medicines in even serious cases and Hahnemann says distinctly that the action of homeopathic medication is quick and permanent. The fact is that under our treatment diseases cannot assume the same serious forms as under allopathic treatment. Fair trial must be given to homeopathic treatment and it will be proved far better than the so-called rational medicine.

P. C. M.

## EFFICACY OF THE NOSODES.

J. N. MAJUMDAR, M. D.

Vaccine therapy is causing great sensation in the allopathic world. The efficacy of the nosodes was first properly demonstrated by Dr. H. C. Allen of

Chicago, although they were known to the homeopathic world previous to that. In England it was first extensively used by Burnett.

Some years ago I cured a remarkable case of malarial cachexia with enlarged liver and spleen in a boy of 14, with Bacillinum 200, where all the well-selected remedies had failed. The family history led me to use the drug.

In a case of typhoid where the skill of the most eminent men of our profession had failed and where the patient was on the verge of the grave, a single dose of Psorinum 400 brought about a radical change in the condition of the patient and a complete cure was effected.

In a case of dysentery diagnosed as amæbic by the specialists of the other school, and where great homeopaths had also failed, a single dose of Medorrhinum 200 cured the case. The man had a violent attack of gonorrhœa just previous to this, which was *remarkably* (?) cured by injections by eminent specialists. The gonorrhœa re-appeared and the man made a complete recovery.

A case of enlargement of the glands of the neck with high fever in a child 6 years old, where Bellad, Mercury and the other indicated remedies failed, a single dose of Bacillinum 200 cured the fever and the glands disappeared within a short time. The mother died of tuberculosis two years previously.

Variolinum I have used very successfully in many cases of smallpox of the worst type where the throat

was badly affected and where the eruptions did not develop properly.

## News and Notes.

### SOME MEDICAL NOTES FROM ANCIENT MESOPOTAMIA.

Dr. Paul Haupt, of Johns Hopkin's University, has, in the *United States Oriental Research Journal*, been giving a revised translation of the difficult cuneiform text in the Annals of Assurbannipal, king of Assyria, describing the illness of Teumman, king of Elam, with whom the Mesopotamians were at war. This record has been for the last forty years differently rendered, and was thought to indicate that the disease was rabies, because one sentence is capable of being read as "he behaved like a mad dog" ; but Professor Haupt, after an elaborate discussion of the text from our knowledge, now so advanced, of the cuneiform vocabulary, and a comparison of the words with their congeners in other Semitic dialects, shows that the following is the correct translation. "At that time he ( Teumman ) had an attack, his lips slavered, his eye rolled ; wildness was imported to it." This version agrees quite closely with the malady being an epileptic fit, for during an attack of morbus sacer the eyes roll wildly and the sufferer foams at the mouth. The ancients were agreed that such disease was specially inflicted by the gods, and in a further part of the inscription the origin of it is attributed to Assur and Ishtar.

The existence of veterinary surgeons in very early times in Babylonia is disclosed by the ancient law code of King Hammurabi. This is confirmed by a cuneiform tablet, Rm. 362 in the British Museum, which, though much defaced, scholars can detect gave a list of plants useful for treating colic in the horse. One line reads, "Plant for abdominal cutting pain in the horse." Other lines read in Babylonian what is most nearly translated by "Contunde in vino, ungue ad abdomen." This tablet probably presents the earliest known instance of cataplasmata being utilised for treatment of colic of the horse.

Dr. Felix von Oefele, whose residence appears now to be in New York, has been writing in the *Journal of the American Oriental Society* upon a Babylonian statuette of the jerboa, or Egyptian jumping mouse, especially with regard to the accurate representation of zoological details showing careful morphological observation. The double length of the tibia in comparison with the femur is carefully copied. The animal is still to be found in the Western Babylon desert, and doubtless it was there, and not in the Sinai Peninsula, that the artist obtained the specimen he copied.—*Lancet*.

### BELLADONNA.

*Atropa Belladonna*—Deadly Nightshade—Tincture of whole plant when beginning to flower.

From Belladonna are derived the closely allied alkaloids, Atropine, Hyoscyamine, and Hyoscine or Scopolamine. These

are also found in the drugs Hyoscyamus and Stramonium. It is consequently not wonderful that the three possess many points of resemblance, but the tinctures none the less give rise to symptom pictures in provers which are by no means identical, and the three drugs have their own spheres of action. None of the alkaloids have been effectively proved (though some data exist for the use of Atropine), wherefore the homeopathic physician relies on the well-tested tincture of Belladonna, valuing as usual precision of indication beyond possible concentration of power. As however the alkaloids are largely preferred by non-homeopathic prescribers, and are held responsible for the main actions of Belladonna, it is important briefly to give an outline of their effects, which are at any rate important features of the drug symptom picture.

• Atropine is a stimulant to the central nervous system : that is the cardinal feature of its action. A dose of  $\frac{1}{4}$  grain (which is a large dose), will cause in man the following symptoms : marked dryness of skin and throat, thirst, difficulty in swallowing : hoarseness : nausea (sometimes vomiting), headache and giddiness : the pupils dilate, the respiration quickens, and the pulse rises to 100 or over. Redness of the skin is common and inflammation of the conjunctiva. If the drug is pushed still further the pulse rate runs up exceedingly, restlessness garrulity lead to confusion of speech and finally to maniacal delirium. Marked muscular tremor and convulsions appear and gradually the stage of excitement passes over into one of coma : respiration and pulse become slow and irregular and death from asphyxia ends the story. Some such symptom complex is seen as the result of accidental deadly nightshade poisoning which is not so very uncommon. Oliver Madox Brown in the Dwale Bluth gives a very excellent description of it as seen by a layman of great power both of observation and description.



The cause of these symptoms is briefly a stimulation followed by a depression of the central nervous system. Unlike Strychnine, which affects principally the spinal and medullary centres, Atropine stimulates most the brain centres. Not reflex but co-ordinated movements are made more active (speaking, etc.): the reflex sensibility also is heightened but this is much less marked a feature of the drug action. Yet the part of the brain chiefly affected is not so much that which rules the highest psychical function but chiefly the motor centres. These being stimulated become less and less controllable and increased action follows until at last depression ensues as the result of over-stimulation.

Most secretions are diminished by Atropine, saliva, gastric and pancreatic juice, mucus, sweat. This is the result of failure of the nerve impulses to these glands not to an action on the gland cells. It is interesting to note that as far as the salivary gland is concerned the action of Atropine is on one set only of nerve ends (chorda tympani nerve ends not sympathetic) a specialised action which is a good instance of the fact so well known to the homœopathist that drugs seem to pick and choose among bodily structures sometimes with extraordinary precision. The secretion of bile is checked also and the conversion of glycogen into sugar: milk is not affected. It is well known that this secretion is little controlled by the central nervous system.

Unstriped muscle (except in arteries) is affected by Atropine. The pupil dilates as the result of unopposed sympathetic nerve action, the ciliary nerve ends being poisoned by the drug: at the same time power of accommodation is paralysed. In the bronchial muscle fibres Atropine seems to paralyse the vagus nerve ends which cause contraction. In stomach and bowel, however, vagus and splanchnic nerves are unimpeded by Atropine, but abnormal peristalsis (of non-

vagal causation) is controlled by it. Large doses seem to increase peristalsis and may account for the vomiting and occasional purging of poisoned cases. Spleen, uterus and bladder also continue to respond to normal nerve stimulation after Atropine but are then immune to the poisons which otherwise induce violent contractions. Poisonous doses often produce a desire to micturate without ability to perform the act after a preliminary emptying of the bladder as an early effect of the drug.

In the heart Atropine inhibits the action of the vagus. There seems to be some direct action on the heart muscle which causes a preliminary slowing of the pulse, then it quickens, the vagus control being removed.

Sensory nerve terminations are depressed by Atropine causing numbness but the unbroken skin prevents local absorption.

Atropine causes a definite rise of temperature, perhaps from an action on the heat centres in the brain.

The gross effects detailed above will be recognised in the provings but these also add the finer shades which clinical experience has elaborated into trustworthy indications for the use of the drug as a remedy. It must be noted again that Tincture of Belladonna is the subject of the provings and contains more than Atropine. For instance, among its mineral constituents, Phosphate of Magnesia is prominent. Homœopathists know this as an agent to relieve pain when the general symptoms of the case correspond and it is possible, seeing that Atropine shows little power to cause pain even in large doses, that the undoubted efficacy of Belladonna in certain painful affections is due to the Mag. Phos. which it contains. This of course would not be the explanation of relief from its use in (say) biliary colic; there its successful action would have to be explained as a relaxation of spasm.

Primarily Belladonna acts on the brain; unless symptoms of cerebral origin are prominent, it is not likely to prove the desired remedy for any case. Herbivora (especially the rabbit) are all but immune to its poisonous action, and it has been suggested that the explanation of this is to be found in the relatively poor brain development. It seems, however, more probable that in rabbits and other herbivora Atropine is broken up in the blood by a mechanism that does not exist in carnivora or in man. It is nevertheless a good observation that the more mentally developed respond on the whole better to Belladonna than the less developed. Hufeland, Hahnemann's famous contemporary, even said that on idiots it hardly acted at all. It would, however, be a mistake to push this idea too far. The deep-acting drug that corresponds most closely to Belladonna is *Calcarea carbonica*, which is notoriously often of extreme value in rather stupid children, though even here a qualification may be made, in so far as it is not so much congenitally stupid children, that respond as those who suffer from mental deficiency the result of disease. For instance, slight degrees of defect in thyroid secretion often become normal under *Calcarea* and the slow backward child becomes intelligent (see *Calc. Carb.*)

Belladonna is on the whole a remedy of swift but not very prolonged action, suitable for acute and subacute disorders. The most marked general characteristic in its pathogenesis is sensitiveness,—both general and of the special senses. Every stimulus becomes almost unbearable, light, noise, any motion or jar will aggravate suffering. Response is very quick and the heightened sensation causes great alertness and irritability. Its general reaction to heat is one of relief: subjects that need it are chilly, made worse by cold air or applications and relieved by heat. The pains developed in

its provers were severe and of great variety, throbbing, burning, cutting but, all relieved by heat. It is characteristic for them both to come and to go suddenly: they are paroxysmal. Paroxysmal pains relieved by heat resemble the pains produced by Mag. phos. and it has already been suggested that possibly the presence of this mineral in Belladonna is responsible for the causation of Belladonna pain and the power of the drug to relieve it. It is also noteworthy that both Mag. phos and Belladonna affect predominantly the right side of the body.

The pains that call for Belladonna are often those accompanied and caused by acute local inflammation: the classical signs, heat, redness and burning appear notably in the Belladonna pathogenesis, and it sometimes seems to abort acute local inflammations if given early *e. g.*, in furunculosis. Over inflammations of serous membranes, especially of the peritoneum, its remedial power is very marked. Pleurisy more often requires Bryonia and Meningitis Apis, though either may present Belladonna symptoms and respond to the drug, but for any form of acute peritonitis Belladonna comes into the very front rank of remedies. Acute appendicitis, salpingitis or other pelvic peritoneal inflammation, whether or no operation is needed, will almost certainly benefit from its administration. The characteristic picture is one of acute onset, with sudden severe paroxysmal pain, constipation, high temperature, rapid full (not tense) pulse, flushed hot face and dilated pupils, a semi-stuporous state frequently broken by sudden starts, cries, outbreaks of delirium: there is a tenderness of the abdomen, which, like the pain, is relieved by heat locally, an excessive sensibility to any stimuli whenever the stupor is broken, a throbbing pulsating headache. The exposed skin feels hot and dry—though the parts covered sweat. There may be a definite erythema. The pains (apart from joint

pains) are often aggravated by lying down—which leads to attempts to move about unless the illness is very severe, and easily distinguishes the case that needs Belladonna from the case calling for Bryonia. In pleurisy or pleurodynia the patient who is helped by Bryonia lies on the affected side to limit its movement, the candidate for Belladonna lies for choice on the sound side.

Such a symptom picture as that detailed above may appear in many acute conditions and whenever characteristic will call for Belladonna. The facts that with Belladonna the pharynx is dry and inflamed and the skin shows a smooth red rash have naturally led to the use of the drug in scarlet fever but it is a great error to suppose that it is always indicated in that disease. It is necessary for the kind of symptom complex to be present which has been described ; and the characteristic rash is the smooth, even, scarlet rash which does not appear in all scarlatina epidemics or cases. From the time of Hahnemann physicians have believed that Belladonna has a prophylactic value in epidemics of this disease: if the prevailing type is really similar to the Belladonna pathogenesis, a prophylactic use of the drug is possible enough to make it worth while to give likely sufferers the benefit of the doubt. But it is neither proven nor even likely that it will ward off any and every infection of scarlet fever. To establish its value in this respect is far from easy. Experiments made at a big fever hospital in America were entirely negative as far as concerned the existence of any protective value as a result of the repeated administration of low potencies. But before the point can be regarded as finally determined further experiments are desirable. Whatever the protective body mechanism may be that wards off scarlet fever infection or modifies its virulence, it can only be by a stimulation of this (if at all) that Belladonna possesses a

prophylactic value. Presuming that it can stimulate this resistance, analogy to vaccines would suggest that the healthy should receive rather one (or two) large doses than repeated small ones. Conceivably also high potencies (in single doses) might develop resistance. Baptisia only causes the appearance of specific agglutinins in the healthy after large doses, and until Belladonna has been tried as a prophylactic in full doses of tincture (one or two), its claims cannot be finally dismissed.

In the mental sphere, Belladonna is characterised by symptoms of violence, delirium (furious and loquacious), agitation, and excitement. Between the attacks of excitability there will generally be a state of semi-stupor, which may end in dementia. Fantastic illusions occur, and terrors and startings from sleep (especially at night; the marked dread of darkness is characteristic of Stramonium); there is generally ill-temper, often anger, and fear is a prominent symptom. The mania that calls for Belladonna is furious but not obscene: the latter state is more often met by Hyoscyamus.

Acute headaches are often much helped by this drug. Congestion of the head, with flushed cheeks and dilated pupils, and a throbbing, pulsating, sharp pain, that both comes and goes suddenly, paroxysmally, these are the characteristic features. There will be marked vertigo, perhaps disturbances of vision. The pains are worse for lying down. Spasm and twitching are frequent symptoms, or convulsions. If exanthemata in children begin with violent convulsions, Belladonna is often the remedy to give the cases a good start. Paroxysmal spasms and convulsions of cerebral origin are so characteristic of Belladonna that it is naturally thought of in epilepsy, and to the prominent symptoms of an attack it can show a close parallel in its pathogenesis. It is not however a very deep

acting remedy. So that its undoubted value is mainly in quite recent cases or as a temporary aid to diminish the frequency of attacks.

With the special senses the dilating effect on the pupil is well known. Acute conjunctivitis with little secretion may be helped by it: the nasal mucous membrane is made dry and burning by Belladonna. Reactions to sense stimuli are generally heightened. Two cases of poisoning resulted in complete deafness. This was almost certainly due to a central cause, and Dr. Cooper reported some success in chronic nerve deafness with Belladonna in unit doses.

The mouth is dry and parched with thick viscid saliva. The tongue red, hot, dry and cracked, sometimes coated. The papillæ may be prominent. Toothache from inflammation with redness and swelling often obtains relief from Belladonna when pain is violent, paroxysmal and relieved by heat. The throat is dry, burning and painful: swallowing and talking are alike painful: the tonsils may be inflamed but except in the very early stages acute tonsillitis more often responds to Baryta and later to Guaiacum or Hepar Sulph. In the early stages, however, it may be checked by Belladonna or Apis. If Belladonna is indicated, heat is comforting to the patient. Follicular tonsillitis generally needs Phytolacca or Mercury, Diphtheritic cases Cyanide of Mercury or Lachesis or Lycopodium. Chronic tonsillitis (when operation is regarded as unnecessary, as it often is when homœopathic treatment can be given steadily), generally responds well to Calcarea which is the chronic counterpart in so many ways of Belladonna.

So sore is the pharynx and dry that, although thirst is great, swallowing is avoided, and there may be spasms of the œsophagus on attempting it. So that Belladonna comes to be considered for hydrophobia, but there is not enough experience of its use in this disease available as yet to

establish or discredit its value. On a symptomatic basis the prescription of it would appear to be worth a trial.

With the thirst there is sometimes considerable hunger : gastric discomfort is considerable, but the colic characteristic of *Belladonna* affects more the lower bowel. It causes violent spasmodic pain, worse after eating (probably from stimulation of the gastro-colic reflex) and there is generally constipation. The abdominal pain is severe, burning and cutting, and the distended abdomen is very sensitive to touch or even to jarring of the bed. It may be accompanied by vomiting so that a fairly close picture of biliary colic can be made out of the pathogenesis. *Atropin* is often of more value in this emergency than *Opium*, and though it is usually given in a material dose it is probable that its action is homœopathic (*i. e.*, it relieves spasm and can cause spasm) and *Belladonna* in potencies has been praised by physicians. More often however homœopaths think of *Calc. carb.* in potency for biliary colic, once more indicating the close symptomatic resemblance between this drug and *Belladonna*.

The patient who requires *Belladonna* is more often than not constipated. Spasm of the anus and tenesmus are common symptoms, and sometimes there are frequent small loose stools with little or no bile in them.

In the genito-urinary sphere *Belladonna* is useful for incontinence of urine (though in enuresis of children *Calcarea* is usually of more permanent value for the cases whose type suggests *Belladonna*). Spasmodic retention will benefit from it when other symptoms agree. It has value for spasmodic dysmenorrhœa and spasmodic ineffective labour pains if other symptoms confirm the choice. The menses are usually too profuse. The power of *Belladonna* to cause local congestion leads to hæmorrhage with some frequency in its pathogenesis: various bleedings (uterine, hæmorrhoidal, nasal, etc.), appear.



In the respiratory tissues the effect of Belladonna on the nose in drying up secretions and causing irritations is continued into the larynx and trachea. Consequently it becomes a remedy for a dry, tickling cough, excited by any touch on the larynx, with a sense of constriction and often painful stitches in the chest. The voice is weak and hoarse. Often the cough is spasmodic and the orthodox prescription of the drug in whooping cough could often be justified on grounds of homeopathicity. The tickling is as of dust in the larynx, and the resultant cough fatiguing, the continued strain of it may cause hæmoptysis. Pleurisy cases may suggest Belladonna now and then, and the cough of early tuberculosis is often much relieved by it, although its chronic counterpart • Calcareæ, is as a rule preferable, because of its deeper curative action. If, however, Calcareæ is being given in early phthisis in single spaced out doses (usually the method of choice), it is often convenient to give as well a palliative for such a troublesome symptom as the ineffective teasing cough, and for this purpose in these cases Belladonna is much the best. It can be given in low potency without interfering with the Calcareæ.

Some of the dyspnœa of Belladonna is due to its action on the heart ; symptoms that call for it here are tachycardia with violent palpitation. Asthma cases are not very often of the general Belladonna type, but the drug should not be forgotten when the spasmodic element is predominant and there is little or no bronchitis. The tachycardia suggests also its use in Grave's disease, and it can show tremor in its pathogenesis and some indications of effect on the thyroid gland. Nevertheless the use of it is seldom efficacious in this disease, for such resemblance as there seems to be is really superficial, and the disease has as a rule too profound a causation to be much influenced by a drug of (relatively) brief and shallow action.

In the nerve-muscular sphere the neuralgias characteristic of Belladonna have been mentioned already. The pathogenesis shows many pains in joints and limbs, with cramps and tremors : the pains are severe and show the sensitiveness to external stimuli characteristic of the remedy. Its use may be now and then suggested in acute or sub-acute rheumatism, or more often in gout. Although the general reaction of Belladonna is to have symptoms made worse by rest, this does not apply to joint pains, which are aggravated by movement.

The effect on the skin is to cause an erythema which may become erysipelatous. Local redness, swelling, heat and pain are all Belladonna symptoms and it has real value in acute skin inflammation (Erysipelas, etc.). Laboratory evidence of its power is lacking as yet but from pathogenesis and clinical evidence it is quite probable that it would be found to have a specific influence on at least some varieties of streptococcus. In general Belladonna is indicated in acute illnesses with marked excitement and violent reaction. There is great tendency to congestion of parts and great general sensitiveness to external stimuli. The time of greatest suffering is usually by night rather than by day, although from three to four in the afternoon (earlier than with *Lycopodium*) there is frequently a secondary time of exacerbation of symptoms. The excitement passes into a semi-stupor for a time, and on the whole there is a good deal of somnolence in cases that call for the drug : the patients start from sleep or have terrifying dreams, and the stupor is broken by paroxysms of violence and excitement, but in the course of twenty four hours a considerable amount of sleep is usually obtained. Fever is generally continuous with a full, strong, but not tense pulse. The skin is dry and burning, sweating chiefly or only on covered parts or amid thick hair. The head is nearly

always hot, with a flushed face, the feet may be cold. It may be repeated that when Belladonna is required, head symptoms are always prominent : often they are the first to appear (headache, etc.) and the other parts of the body are affected later. In spite of the signs of local congestions patients who need Belladonna are generally chilly and like hot applications and external heat.

Belladonna follows Aconite well : the deep acting drug Calcarea Carbonica has a very close relationship to it, which has been already sufficiently emphasised and whenever a case has responded well to Belladonna Calcarea should be thought of to complete its action. It is interesting to note that Belladonna grows best in dry limestone soils.

### SYMPTOM INDEX.

*General Symptoms.* Excitability : Congestion : violence : General < from cold > heat : < night and 3 to 4 p. m. : tendency to spasm : great general sensitiveness to external stimuli : pains come and go suddenly : restlessness because many symptoms are < lying down.

*Mental Symptoms :* Excitability or delirium, violent and incoquacious, alternating with condition of semi-stupor : night terrors ; terrifying dreams : fear of all kinds : mania passing finally to dementia : anger and ill-humour : fantastic illusions : sensitiveness to impressions.

*Head Symptoms :* Congested face, red cheeks, dilated pupils : giddiness : tremor or convulsions : violent pains in the head, sharp, cutting, pulsating, which come and go suddenly and are relieved by heat and aggravated by pressure or even touch, and by external stimuli : sweat in the hair.

*Special Sense Symptoms :* Dilated pupils : illusions of sight : dry, inflamed conjunctiva : photophobia : nerve

deafness : hæmorrhage from the nose, with dryness of mucous membrane.

*Alimentary Canal Symptoms* ; Toothache from inflammation : mouth and tongue dry : tongue hot and cracked, red or coated : enlarged papillæ : throat dry, sore burning : thirst but spasm on attempting to drink : great abdominal pain : paroxysms or colic chiefly in lower bowel : constipation : pains burning and stabbing generally > heat.

*Genito-urinary Symptoms* : Incontinence of urine : spasmodic retention : violent ineffective labour pains : paroxysmal dysmenorrhœa : menses increased.

*Respiratory Symptoms* : Hoarseness or loss of voice : dry, teasing cough : tickling as of dust in the larynx : paroxysmal cough with hæmoptysis : stitching pains in the chest, patient finds relief by lying on the side least affected (unlike patients needing Bryonia) : cough < night or lying down : spasmodic dyspnœa.

*Cardiac Symptoms.* Tachycardia : violent palpitation.

*Neuro-muscular Symptoms.* Violent neuralgias, paroxysmal > heat ; tremor ; cramps ; joint pains < movement.

*Skin Symptoms.* Erythema smooth and deep red ; local inflammation, redness, swelling heat and pain ; erysipelas ; sweat on covered parts.

*Sleep Symptoms.* Drowsiness and somnolence broken by fits of excitement or night terrors ; vivid frightening dreams.

—*The Homeopathic World.*

## INFLUENZA REMEDIES FOR 1918 EPIDEMIC.

BY VIRGINIA M. JOHNSON, M. D., CHICAGO,  
SECRETARY OF THE CHICAGO REGULAR  
HOMEOPATHIC SOCIETY.

The remedies that we have successfully used in the present influenza epidemic, which we have selected according to the law of similars, are, first, *Ars. Alb.* The general indications are : General coldness, chilliness, patient cannot get warm, wants to get to the heat, relief from the direct heat, aggravation from cold in any form, wants cold drinks but worse from them, they come up immediately ; worse from cold foods ; better from hot foods and drinks. Worse at night, especially after midnight (meridian time). Anxious, restless, dreads and expects death ; in despair. Better in the open air, but wants to get to the heat. The chill is better from the direct heat. Worse or begins on the right side. The eyes discharge a thin burning fluid. In the beginning the discharge from the nose is thin and watery, and burns, excoriates, the nostrils swell, and crusts and cracks form, and later they peel off. The face is pale, pulse weak. Great weakness and debility.

*Antimonium tart.* has been of great service in cases where the lips and skin are dry, scaly or cracked. Feels stupid and dull. Worse evenings or at rest, or from heat ; better from sitting erect and in the open air. Tongue coated white and thick or red ; nausea ; nose swollen thick and painful. Sharp pains in the throat. Feels suffocated. Rattling of mucus in chest with inability to raise it. Nose feels stuffed and suffocated. Sleepy and drowsy. Mucus thick and whitish, not stringy. Muco-albuminoid mucus. Pains in back ; chilly all over. Better from the head high, and from hot wet applications. Tightness of chest. Mucus rales ; if the expectoration is too free, it will decrease it, if suppressed

it will restore it, if the dose of any potency is not too large. Trembling, throbbing ; skin dry ; sweats on face. Pain in forehead going down to the left eye. Eyes dim and bloodshot. Relief from pressing the lids. Face looks pale and sunken. If several of these symptoms are present, the relief will be rapid, if the potency is not too low.

Bryonia. Alb. Wants to go home to die. Every time the patient stoops the head he feels as if it would burst. Cannot dismiss the business or affairs of the day, even during sleep. Dizzy, with feeling of fullness of the head ; worse when stooping or rising. Wants to keep perfectly still ; better from hard pressure on the painful spot and from cold ; worse from motion and heat.

Bryonia. Face red, bloated. Awakes with the pain or with the headache. Eyes feel as if pressed out of the head, swollen, inflamed. Burning, stitching pains, worse from heat and motion and from hot drinks and foods ; better from cold drinks and food. Wants a big drink of cold water. The nose is swollen and sore to the touch. Mouth, tongue and throat dry and hot. Chill begins in fingers and toes. Cough worse going into warm room. Worse or begins on the left side. Everything tastes bitter. Especially useful where the chest and lungs are involved.

Gelsemium. Headache begins in occiput or spine. Sometimes the patient describes the headache as beginning in the toes and ascending to the head. Goose flesh. The chills go up. Worse in damp weather. A feeling tightness, or as if a band around the head. Often the attack seems to follow, or is brought on by some excitement, or anticipating some unusual ordeal or event, from sudden emotion. Heart symptoms are relieved by constant motion. The feet feel as if in cold water. Stupid. Circulation increased ; pulse full, soft, compressible. Eyes sore on moving them ; eyes

droop and feel heavy ; sees indistinctly or double, or only part of an object. Sneezing and coryza. Sudden loss of hearing. Head feels better from copious discharge of urine. Aversion to light, more to artificial light. Nose and face feel full ; coryza excoriates ; profuse watery discharge. Face yellow. Rawness and roughness of the throat. Soreness of the chest, right side.

Natrum Sulph. Burning in the eyes, with discharge of burning water. Eyes feel weak and dim. Nose itches, especially at the wings. Nose sore as if full of active, short, sharp, burning, sticking needles ; with thin discharge in the beginning, later the discharge is thick greenish, or greenish yellow, not stringy. Pimples and sores on the upper lip, itch and burn, must rub them ; salty or rotten tasting mucus later. Gums burn like fire, also the left upper lip. Tongue burns and feels as if blistered. Wants cold things, and wants the open air, much like Pulsatilla.

We have given these remedies in potencies ranging from the 6th to the 2,000, with the result that every case has recovered in a few days.

1518 N. Washtenaw Ave.

—*The North American Journal of Homeopathy.*

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# হানিম্যান

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১২৯১, বহুবাজার ষ্ট্রীট, কলিকাতা ।

বার্ষিক মূল্য—সডাক ২৫০ মাত্র অগ্রিম দেয় ।

সম্পাদক—ডাঃ আর, আর, বোষ, এম. বি, ( রিটার্ডার্ড এসিট্যান্ট সার্জেন ) ।

কলিকাতার খ্যাতনামা হোমিওপ্যাথিক চিকিৎসকগণ কর্তৃক পরিচালিত ।

হানিম্যানের 'অর্গান' ও কেণ্টের হোমি-ফিলজফির সরল বঙ্গানুবাদ, ঔষধজ্ঞাবিজ্ঞান, চিকিৎসিত রোগীর পুঙ্খানুপুঙ্খ বিবরণ ও প্রশ্নোত্তর সাহায্যে যক্ষ্মলের চিকিৎসক, গৃহস্থ ও শিক্ষার্থিগণের সম্বন্ধে ভজন করিয়া সহজ ভাবে হোমিওপ্যাথি শিক্ষা দেওয়া হয় । একরূপ মাসিক পত্র এই নূতন এবং সর্বত্র সমাদৃত । আজই গ্রাহকশ্রেণীভুক্ত হউন ।

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আমরা আমেরিকার বিখ্যাত “বরিক এণ্ড টেফেলের” নিকট হইতে বিশুদ্ধ হোমিওপ্যাথিক ঔষধ, শিশি, কর্ক, গ্লোবিউলস, সুগার অব মিক্স ও পুস্তক ইত্যাদি প্রচুর পরিমাণে আমদানি করিয়া বাজার অপেক্ষা সুলভ মূল্যে বিক্রয় করিতেছি । ইহা ব্যতীত বাজালা পুস্তক, কাগজের কেশ, কাঠের কেশ, থারমোমিটার, পিচকারী ও চিকিৎসা সম্বন্ধীয় যাবতীয় দ্রব্যাদি অধিক পরিমাণে ঠেকে মজুত রাখিয়া সম্ভাদরে বিক্রয় করিতেছি ।

যক্ষ্মলের অর্ডার বিশেষ যত্নের সহিত অতি সত্বর পাঠাইয়া থাকি । কলেরা ও গৃহ-চিকিৎসার ঔষধপূর্ণ বাক্স—ফোটা ফেলা যক্ষ ও পুস্তকসহ যথাক্রমে ১২, ২৪, ৩০, ৪৮, ৬০, ও ১০৪ শিশির মূল্য যথাক্রমে ২১০, ৩৮০, ৪৮০, ৬৮০, ৭১০ ও ১২১০ টাকা, মাশুলাদি স্বতন্ত্র । বিজ্ঞাপনের আড়ম্বর দেখাইতে অনিচ্ছুক, একবার পরীক্ষা প্রার্থনীয় ।

এলোপ্যাথিক ষ্টোর, ১৪২ বনফিল্ডস লেন, কলিকাতা ।

[ নতুন হোমিওপ্যাথিক পুস্তক । ]

ডাক্তার শ্রীজিতেন্দ্রনাথ মজুমদার, এম্ ডি, এল এম এক বি, কৃত

হোমিওপ্যাথিক

# চিকিৎসা-সার ।

মূল্য ২১০ টাকা, ডাকমাণ্ডুল স্বতন্ত্র ।

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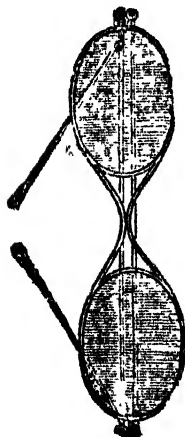
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EDITED BY

P. C. MAJUMDAR, M. D., & J. N. MAJUMDAR, M. D.

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XXVIII.]

FEBRUARY, 1919.

[ No. 2.

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## INFLUENZA.\*

• When writing about the epidemic of fever then prevailing in Calcutta, in August 1918, I said that an epidemic of fever had passed through the city. Little did I dream that we had much to pass through yet. When I think of the far-reaching effects of this dire disease, I am inclined to think that this pandemic attack of influenza has done more harm and caused more loss of life than the European war which has just come to a close. It has been a very extensive epidemic attacking large numbers of people. The rich and the poor, the high and the low have been equally affected by it.

Influenza is a very ancient disease. The epidemic that we had in 1889-90 was a very extensive one. It was a part of a pandemic that arose in this country and spread through Europe and the greater part of the world

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\* A Paper read before the meeting of the Calcutta Homeopathic Society.



and was considered to be the largest of its kind. But the present epidemic has eclipsed all previous record. There was a pandemic in 1847-48. We find from history that influenza was prevalent in 1412 B. C., because we find mention of the disease by Hippocrates and Livy. Hitherto the disease had been characterised by comparatively small mortality. But the present epidemic has been characterized by enormous mortality. Pneumonia seems to supervene so quickly an attack of Grippe or Influenza.

It is very gratifying to note that it had been observed by an eminent medical authority of America that every impartial observer who is familiar with all therapies must admit that the Homeopathic treatment of influenza is superior to all others.

We also rejoice to find that the Homeopathic physicians of America have seldom had cases that have ended fatally which had been under their care from the beginning of the attack, and we are glad and proud to be able to think that our experience corresponds with theirs.

The principal remedies used by them have been (1) Acon., Ars., Bel., Caust, Merc., Nux vom ; (2) Arn, Bry., Camph., China, Ipec., Phos., Puls., Sabad., Sen., Sil., Spig., Squill and Veratrum.

Besides these remedies Dr. Small mentions Lachesis, Euphrasia and Allium Cepa as some of the other remedies. In neglected or protracted cases Stannum, and China have been found useful. These remedies have excellent effect in relieving the complete prostration.

tion and exhaustion that inevitably follow an attack of influenza. Hyosc. is a remedy that relieves the constant tickling cough that disturbs the sleep of these debilitated patients so often. Bell and Gelsem are two other remedies that we must not forget in cases where the brain and the sensorium seem to be affected from the beginning.

Though the disease is ushered in by fever it seems to affect nearly all the tissues and organs of the body. A characteristic bacillus similar to that of influenza has been found in the present epidemic also. Pneumococcus is rarely found even in cases complicated with pneumonia.

Without going into the symptomatology and pathology of the disease which are all too well known to you, I shall describe the treatment that we have found to be best here in the present epidemic. Our municipal authorities have been very energetic in introducing and improvising prophylactic measures. It is said that the spraying of the throat with thymol has a very good effect, because the throat is often first affected in this disease. Prevention of cold should be very carefully observed along with the ordinary hygienic rules of air, light and ventilation. Cases of colds and catarrh should be taken notice of at once, for these cases rapidly develop into pneumonia. Homeopathic remedies have been uniformly successful in our hands. Acon., Ars., Bel., Bry., Eupat., Gelsem., Kali c., Merc. s., Nux vom., Natrum M., Rhus., and Sulphur have been the most useful remedies. Out of a *resumé* of some

312 cases that I treated, I lost only two cases that came to me after all the other treatments had been of no avail. There were two or three other remedies that I used with success in the more severe forms of the disease, namely, Ferrum Phos, Phosp, China, Ipec, Apis and Ammon carb.

So that we find that our experience tallies with that of our great American colleagues. Gentlemen, when I say that I speak from experience with regard to this disease, I mean what I say, because I have myself been one of the worst victims. J. N. M.

### INFLUENZA. \*

The term *Influenza* has derived its origin from the Italian Influenza (Lat. *in* into, and *fluo* to flow); the phenomena were considered to be due to the influence of the stars. A severe epidemic catarrhal fever with great depression, chilliness, running from eyes and nose, frontal headache, constant cough, restlessness and weakening fever. It arises at various periods from some peculiar condition or through contamination of the atmosphere. This disease first visited England in 1510, of which there has been a trustworthy description. The poisonous influence, whatever its nature be, wings its way with greater rapidity than the speed of the human intercourse. It once visited England in 1788, which extended over the whole of Europe and was very fatal. Dr. Southwood Smith

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\* A paper read before the meeting of the Calcutta Homeopathic Society.

said that when the influenza broke in London in 1847, it spread in a single day over every part of the metropolis, and affected upwards of 500,000 persons.

**Symptoms** :—The chief symptoms are heat and dryness of the skin, urgent frontal headache, coryza, constant sneezing, tenderness of the fauces with inflammation of the tonsils, prolongation of the uvula, that is, affection of the whole of the palate-bones, hoarseness, harassing cough, shortness of the breath, pains in the back and limbs, perverted taste and some times disorders of the stomach, all the signs of nervous and muscular prostration, such as an uncommon degree of languor and debility and dejection of spirits. Occasionally the danger is much increased by the setting in of acute bronchitis, capillary inflammation and pneumonia, accompanied with the developed brain symptoms, such as cerebritis, meningitis, i. e. according to the severity of the cases. The special peculiarity of the case is *its sudden and rapid attack*. The disease is more fatal to the infants and the old than to other persons. In favourable cases it runs its course in less than a week, but in severe cases it may protract its course for a long time.

**Diagnosis** :—Influenza differs from a common cold in its greater severity and especially in the amount of great prostration and nervous weakness from the very beginning of its attack.

**Treatment** :—Influenza appeared this year not only in Europe but in almost all the parts of India most violently. As regards its treatment, I myself from my own

experience can boldly say, that homeopathic treatment is most successful. I, as a most insignificant old homeopathic practitioner of Serampore, have ample opportunity of treating numerous cases here and its neighbouring villages and my successfulness even in most complicated cases, such as pleurisy, pneumonia, pleura-pneumonia, diarrhoea, cerebritis, meningitis and most obstinate form of dysentery, arising from influenza, is satisfactory beyond expectation. There are still under my treatment one pneumonia case, one cerebritis, two dysentery and ten or twelve cases of simple un-complicated cases of influenza. But I am fortunate enough to say, up to this I have not lost a single case of pneumonia, but I have lost one dysentery case and another dysentery case, after 10 or 12 days' treatment in my hand, left my treatment and was transferred to Kabiraji treatment, the result of which is quite unknown to me up to this.

I do not like to detain my colleagues any longer, but to cut short the time, I must only mention the names of the medicines, which proved effectual in my hands, otherwise it will take a long time to describe fully the symptoms of all medicines according to symptoms of the disease, which I have the desire to deal in detail in our important journal the Indian Homeopathic Review.

The most successful medicines in my hands are these :—

Acon. 3x ; Ars. 30, 200 ; Bell. 30, 200 ; Rhustox. 30, 200 ; Bryon. 30 ; Ant. Tart. 30 ; Kali carb. 30 ;

Puls. 30 ; Phos. 30, 200 ; Merc sol. 30 ; Merc cor. 30 ; Mag. carb. 30 ; Ipec. 30 ; Sulph. 30, 200 ; Helleb. 30 ; Apis mel. 30 ; Hyosc. 30, 200 ; and Lach. 200, in one or two instances, but the result was not satisfactory. It is needless for me to express that I have used the above medicines according to the symptoms of the cases and the result has been as desired.

I must finish my lecture by adding a few words more to it in which I myself am concerned. Perhaps all the old members and well-wishers of our long standing society are fully aware that although I am one of the most insignificant members of the society and have to join this after much exhaustion, coming from a long distance as Scramapore, yet I have been punctual and regular even in the rainy season all along as far as possible for my enfeebled constitution and broken health of old age. It is to our great misfortune that our meeting of so long a standing has ceased to continue for an undue length of time under the auspices of our late worthy secretary Mr. K. N. Banerjee, for which I have to stigmatise its most energetic, untired and worthy patron Dr. J. N. Majumdar, from time to time, for I know it for certain, in failing of whose unexhausted zeal our so beloved society would collapse. My joy knew no bounds to see its sudden renewal in the last month—5th. January, 1919, when I received a notice to join it, but unfortunately I could not do so, because I was confined to bed, having been severely attacked with War Fever ( Influenza ), which I caught most probably from one of my patients at the time of

examining his fauces. The failure of my attending this meeting was brought duly to the notice of our worthy secretary at the address of 256 Upper Circular Road. Most probably he produced my letter at our last meeting before the Chairman, in which I showed my full sympathy for the meeting, though I could not join it for the above reasons. Now I pray to our Almighty Father for its prosperity and stability.

Dr. S. R. Dutt, Serampore.

1-2-19.

## THE FOUNDATIONS OF INTERNATIONALISM.

BY DR. GEORGE BURFORD.

Two thousand years ago, in a country under the stress of foreign occupation, and with adherents numerable on the fingers, the principle of Internationalism was first laid down as a safe and prerogative guide in the affairs of men. After historic vicissitudes the identical principle comes to the forefront to-day, insistent for generalised acceptance as the only way of conservation of the best to which two thousand years have made us heirs. President Wilson as its representative in practical politics : the Bishop of Oxford speaking with distinction as a theologian : Viscount Grey as a statesman "looking before and after" : Mr. H. G. Wells as a many-sided sociologist : these and other voices not wholly crying in the wilderness, insist on the incorporation of Internationalism as

a benign and driving power in all that makes for the progress of mankind.

Happy the nation or the cause that can assimilate, this widening and accelerating force into its working, and thus ensure the quicker revolution of its wheels of progress! For such blending is likely to be an "acid test" of the powers of survival of principles and parties. The cause being greater than the man, so also it is ampler than "geographical expressions." And the growth and stability of the elemental interests of humanity can no longer be cultivated in water-tight compartments. The views of civilised mankind are rapidly crystallising round quite other centres than those of insulation.

#### HOMŒOPATHY AN INTERNATIONAL INTEREST.

Men of good will have seen and learned that physical health as well as health in politics, is not merely a national, but an international concern. Thus, all the streams of tendency—in which Homœopathy is included—that make for the elimination of disease are of the category of world-interests. The *vis inertia* of mankind in the assimilation of a new idea is always considerable, but varies in time and place: and the stimulus of enlightened example reacts on the more slowly moving as an aid against stagnation. Thus it is not without dynamic to British Homeopathy that the method of Hahnemann has been universally recognised in America. So the object lesson of a Homeopathic Hospital with teaching facilities in



London is an aid and incentive to European colleagues less happily circumstanced. The light and leading of Boston are reproduced through its graduates in Australia: the labours of Kent rejuvenate Homeopathy in England: the homeopathic teaching and practice in Great Ormond Street bid fair to activate thought and work beyond the normal area of the English language.

Health is an interest common to men and all men; and for its foursquare protection there is no finality short of Internationalism. Such is the finding of humanitarians: and as such homeopaths had founded activity on insight before the more recent writing on the wall had instructed the world.

#### ITS INTERNATIONAL ORGANISATION.

The Homeopathic Congress held in London, in 1911, determined to transform a paper Internationalism into an active reciprocity, and appointed a representative council from all the Countries of the World where Homeopathy was living and moving. This Council, numerous in personalities and polygot in attainments, assembled yearly from the time of its creation until the mailed fist and the shining armour of Hohenzollern and Hapsburg were exalted to a bad eminence over Hahnemann and Homeopathy. In 1912 the Council met in Zurich, and conferred on the strength of Homeopathy as a science and its weakness in governmental recognition. In 1913 the representatives met at Ghent, in large number, and addressed themselves

to those problems of Homœopathic foundation and expansion in which the Zurich council had outlined a plan of prime importance. *Inter alia*, Admiral Dr. Vasconcellos from Brazil, Dr. Axell of Sweden and Dr. Cahis from Barcelona left impressions on this meeting which time will not efface. The next annual assembly was fixed for The Hague in August 1914 : and all the indications were for ample, weighty and profitable deliberation.

#### THE PROJECTED ASSEMBLY AT THE HAGUE.

The Homœopathy of the world rose to the occasion. The meeting in the Dutch capital would have been epoch-making, when a week before assembly, came the Blind Fury with the abhorred shears, in the form of the German Emperor, slitting the threads of the fabric, and scattering the threads east, west, north and south, happy to avoid internment. The Russian delegacy had a particularly hard time, and after adventures of a perilous sort ultimately landed in Scandinavia, whence, by circuitous and not easy roads, back to Petrograd. Others of our colleagues left this country on August 2nd, having convinced themselves that there would be no war, until they finally were rounded up in Switzerland, with the slenderest financial basis for their immediate requirements. We add to the list of the Hohenzollern offences against humanity that this Homeopathic Parliament of 1914, unique in influence and judgment, meeting for the sole purpose of giving an uplift to human well-being,

was scattered to the winds in the very moment of its congregation, by the blood-lust which found in Wilhelm its congenial director.

### THE SUBSTITUTED MEETING IN LONDON.

There remained in London, in August, 1914, a substantial remnant of the intending assembly, who had awaited that assurance of safe travel which never came, and who also were sufficiently representative to voice the views of the *confreres* beyond seas. A Provisional International Council meeting was held in London in that month, when it was decided to carry on as regards the maintenance of the machinery of the council, until the promise of the projected meeting at the Hague could be redeemed, expectably in August 1915. But much, much more was on the knees of the gods than was compressed into a single twelve-month; four years of hope deferred have come and gone, and the sufferings of nations have cried to heaven for solace before the life of mankind has been cleansed from the plague which blocked progress and slew remorselessly. Now the atmosphere begins to lighten: and we look to the re-assembly of the Council, probably on the other side of the Atlantic, when Universal Peace is over sea and land.

### EXECUTIVE WORK.

Nor were the activities of the International Council in the pre-war years limited to assembly and conference. One of their number was appointed Envoy

who, by request, visited various continental countries to urge that initiative and convey that stimulus which our colleagues abroad desired to pay in aid. In Sweden, opportunity was offered to address an important public meeting, at which many members of the Riksdag—the Swedish Parliament—were present. The speaker's advent coincided with a Bill before the Riksdag, promoted by a prominent Professor and antagonist to Homeopathy—those continental Professors!—and it was desired to demonstrate to the legislators the Institutions and values of our branch of medicine. To this end a large number of lantern slides were shown, picturing the chief homeopathic hospitals of the world, with some statistical tables of the results of treatment. The same course was taken at Ghent at the time of the Council's assembly in 1913; the oration, in pellucid French, was delivered by one of the Belgian physicians before a large and influential convocation, at which the Governor of the Province presided. Later, other continental visits were carried out, including one to St. Petersburg, where by the influence of Dr. Brasol, a congregation of nobles and military authorities assembled to see and hear something of the public work of Homœopathy outside Russia. And just before the conspiracy against Peace thrust an embargo on progress in medicine, the Council's Envoy visited America, there to describe the work and invite practical support of the International enterprise. This invitation was splendidly responded to by homœopathic American physicians of light and

and leading who made Ghent their Mecca in August 1914.

### RESULTS AND FINDINGS.

What of interest and importance has further issued from the meetings of the council and the interim Executive work ?

Year by year it was increasingly plain that Homeopathy *ceteris paribus* was of larger and livelier growth in those countries where individual freedom was least curtailed : less generalised or vigorous where State organisation had rigidly defined the whole duty of man when ill. Official furtherance appeared invariably on the side of the big battalions in medicine.

Interwoven with this, another powerful determinant was apparent : the free diffusion of a knowledge of Homeopathy by all who possess it. Of such fundamental importance is this, that the efficiency of Homeopathy in any area may be expressed as in direct ratio with a public knowledge of its being and doing. Such was the experience of the Council, and the sage remark of the Oriental "How can I understand, if no man teach me" is an abiding criticism on the abysmal ignorance of Homeopathy current.

If the hindrances to the education of the laity are considerable, they are as nothing compared with those incident to the training of the physician in Homeopathy. It appeared that the United States and Brazil were the only countries where homeopathic medicine was academically taught. England was the only country in the Old World where systematic provision

was made for homeopathic post-graduate teaching. Naturally these facts fixed the attention of the Council : for education to be effective must be organised : nor was the Council cognisant of any standard work, recent and adequate, to meet the requirements of the individual physician, feeling his way from official medicine into homeopathic practice.

This provision would have been made at the Hague meeting. Some of the best brains in academic Homeopathy met there in council, and accustomed to deal with similar problems, would have drafted the lines of procedure and given the initiative to preparation. The demand was insistent, and the call also international. Meantime, the British Homeopathic Association during the War-period has stepped in to make good the deficit.

An enquiry carefully made and occupying much time, into Institutional Homeopathy, yielded results gratifying if somewhat unequal. Never before had the homeopathic institutions of the world been categorically registered, and the results of their work, where obtainable, tabulated. It was a surprise and delight to find that Homeopathy had been impressed into the public service practically the world over. The United States bulked most largely in the return, though the obtainable list was far from complete : and at the other extreme of the register appears China, which has made a beginning with one homeopathic hospital to its credit.

But prior in importance to the edifice is the work

done there. The most striking statistical results were those from one of the asylums for lunacy in the United States, and conducted under homeopathic auspices. Here the percentage of recoveries, certified as *bona fide* returns by the State authorities, exceeds any similar results we have been accustomed to in Europe,

This imperfect record would be still more incomplete were it to contain no reference to the War Hospital at Neuilly, which was the outcome of the deliberations at one of the Provisional International Committee meetings in London late in 1914. As the Report is in the hands of the public, there is no need to dilate on the excellence of the work there carried through.

### How Not To Do It.

But Internationalism is a tender plant : and to fructify must be shielded from perverse influences, as well as maintained by the upholding touch of sympathy. Least of all is a rigid uniformity in collaterals which are not of the essence of the structure to be asked or even expected, what is the pith and marrow of the organisation is, in things essential, unity : in things doubtful, liberty : in all things charity. Unity is requisite and necessary as regards the canons of Homeopathy : uniformity is not possible in nationality or religion or politics or experimental method. Thus a proposition was made to limit the languages of intercommunication to one, to wit, Esperanto :

this was wisely rejected. Such Procrustean methods simply make a desert and call it peace.

Our American colleagues, though of very definite patriotism, have expunged none from their International sodality whose national character is from theirs wide as the poles asunder. To take any other course would have been bad leading, since it leads nowhere: certainly not to any League of Nations, much less of homeopaths. Such fissiparous tendencies are wisely held taboo by broad minds that look before and after.

For the International spirit is a many-sided unity: it normally colours not a part of human life only, but irradiates the whole. Internationalism in Homeopathy readily links up with the same breadth and clarity of view in other departments of the great world: and practised with faith and sympathy, it may be an inspiring spirit in the reconstruction which, statesmen tell us, is among the greatest of the secular signs of the times.

We trust that the Congress which founded the Homeopathic International builded better than it knew: that beside tending to speed up homeopathic progress, their action may prove also to have been a wise contribution to human affairs: and that the next meeting of men and women, similarly minded, of all races and tongues may contribute in a wider sense to the healing of the Nations. So mote it be!

—*The Homeopathic World.*



## MATERIA MEDICA.

### **Kali Arsenicosum.**

I have used this medicine successfully in cases of asthma and bronchitis. Following symptoms were present :—Attack generally in the latter part of night ; profuse, white, tenacious expectoration, expelled with some difficulty, cannot lie down for fear of suffocation. In mental diseases the following symptoms are noticed :—Melancholy and jealousy, very irritable, scolding and morose, not inclined to answer questions asked.

In female genital organs Hering described the following symptoms—cauliflower excrescence of os uteri, with flying pains, pressure below os pubis and stinking discharge. I often use it in various skin diseases. Eruptions over the whole body, both papules and pustules which suppurate and crusts form, hichon confluence. Lepra, Psoriasis.

### **Hypericum Perforatum.**

Very useful remedy in wounds and injuries. I used it with benefit in cases of compound fracture. A pressman had his foot fractured by a machine falling. Pain was awful and bones were fractured. Hypericum 3x internally and externally cured in a fortnight. Allopathic doctors wanted to amputate the foot.

I also used it very successfully in cases of traumatic tetanus, lockjaw with unbearable pain. In meningitis of traumatic origin, concussion of spine after injury and gunshot wounds.

In a case of amputation of humerus in a young man there was good deal of pain. Though the arm was separated, he felt as if the pain was in his fingers. I cured him with a few doses of Hypericum 200.

Malancholy, irritable, inclined to speak sharply.

**Cimex Lectularius.**

The guiding symptom of this remedy is shortness of the tendons, either a mere feeling or actual state. I have cured a case of intermittent fever after a protracted typhoid fever by Cimex 6x. My guiding symptom was that the patient, a young boy, could not stretch his legs during fever. Dr. J. N. Majumdar suggested it in *Kala-azar*. Many allopaths assert that Kala-azar is produced by bed-bugs. It is worth a trial by homeopaths. Dr. Nash very truly remarks about this remedy in the following words "Honor to whom honor is due even if it be a bed-bug."

**Therideon Curassavicum.**

This remedy is very useful in vertigo and headache. I have verified symptoms like these—vertigo on closing the eyes and on looking up. I had a case of a young man. Vertigo on closing eyes, accompanied with headache on the occipital region.

Vertigo from any noise—even the least noise is another symptom. In Menieres disease, aural or labyrinthian vertigo it is an important remedy. I gave it to an elderly man over-worked, with noises in ears and vertigo. Allopathic doctors warned him to be careful as it may lead on to an apoplectic fits. I gave him Therideon 30 with great benefit.

Nash says, oversensitiveness of nerves; scratching on linen or silk, or crackling of paper is unbearable. I had an European lady under my care who had this symptom very prominently. I gave Ambra grisea for relief, but Therideon did her good.

**Glonoine.**

Terrific shocks in the head, synchronous with the pulse, Throbbing pulsating headache, holds head with both hands; cannot lie down, "the pillow would heat."

I have verified these symptoms in the case of an elderly

person who used to get headache with pulsation everywhere. This headache aggravated with the sun, hair cut and during full and new moon.

#### **Kali sulphuricum.**

I have used this remedy in cases of cough with loose, rattling expectoration of yellowish or greenish character, very much like Pulsatilla with which this medicine is in close relationship. A young man with chronic bronchitis, cough aggravated in warm room, ameliorated in open air, slight rise of temperature in the afternoon, great emaciation. Failing with Pulsat, I gave him Kali sulph 200 and a rapid cure was effected.

A young lady had leucorrhea, greenish thick discharge and scanty and painful menses. Kali sulph 30 cured her.

#### **Arum Triphyllum.**

It is a very useful remedy in typhoid fever. Its guiding symptoms are in the lips, mouth and tongue. Hering gives us the following:—appearance of raw bloody surface on lips, buccal cavity, nose &c. Patients often pick and bore into the raw surfaces, though doing so gives much pain, and they scream with it but keep up the boring.

I have cured many cases of typhoid with these symptoms by Arum. A little child was saved by it from great danger. I generally use the lower potency, 3x or 6x.

### **Obituary.**

We regret very much to record the death of Dr. R. C. Nag, a distinguished homeopathic physician of this city. His was a sudden death from heart-failure, in December last. Dr. Nag's early education was at a village school from which he came out and accepted Govt. Service as a clerk in the excise department at Darjeeling. Afterwards he learnt about

the efficacy of homeopathic medicine in his own disease and was convinced that this was the true art and science of medicine. He procured some books and studied them and distributed medicines to the poor. He was eager to learn more and joined Dr. M. M. Bose's Homeopathic College. Thence he went over to America and joined the Hering Medical College. He passed the final examination and came back to India and settled as a thorough-going homeopathic practitioner and successfully practised for a few years. He had established the Regular Homeopathic Medical College where he lectured on the Organon. In him we have lost a true Hahnemanian Homeopath. Dr. Nag left a widow and a large circle of friends and admirers to mourn his loss.

To

THE EDITOR OF THE INDIAN HOMEOPATHIC REVIEW.

#### EFFICACY OF SILICIA.

Dear Sir,

I may be permitted to report to you a wonderful case in which the efficacy of Silicia was observed which I beg to request you to be so good as to insert in your much esteemed journal, in any form you like in its next issue.

Dr. Abdul Baseq of Basirhat—a homeopath and an old subscriber of yours had read the interesting article "Can a Foreign Body Be Removed by Medicine" (Vol. XXVI, Feb. 1917) and when he was waiting to try a case, it chanced that he had to receive on a

night recently a body of men consisting of two brothers, a mother and her suckling male child of one year, the last having thrust a full grown paddy into his left eye, just at the corner remote from the nose in such a way that it could not be seen from outside. The torment and agony of the child was so great that they could not stay at home. The people were of the *Boona* class of the Sunderbans.

They usually treat such cases with sheer neglect. But goaded by instinct the parents thought it best to place him under medical treatment. So they started for Basirhat, the head quarter of their sub-division for the purpose. It happened that the parents were the tenants of Dr. Abdul Baseq and they must not customarily do anything without permission of their landlord and he being a medical practitioner must not professionally allow any desirable patient to go elsewhere unless and until he tried his own skill and ability.

The doctor now applied one dose of *Silicia 30* as soon as he got the patient, that is, at night; the immediate effect of the medicine was that the boy slept peacefully the whole night to the entire comfort of his neighbours. In the morning a portion of the paddy was found visible and though it could be taken out then and there by a little force, still the doctor did not allow it to do so, but instead applied another dose of the medicine with a view to see the full delivery of the entire paddy. At noon, it happened that the paddy with all its microscopic lints came out and fell to the ground to the great surprise and amazement of the

by-standers. Thus the trial of Dr. Allen was corroborated in the above case.

29 10-18.

Yours faithfully

A. K. M. Abdul Wahed,  
Basirhat.

## IPECACUANHA.

### *Cephaelis Ipecacuanha: Tincture and Trituration of the dried root.*

This is a well-known remedy and its most salient characteristic of producing nausea and vomiting is familiar. This symptom is nearly always present in greater or less degree when *Ipecacuanha* is likely to be useful, but there are certain qualities which enable the homeopathist to distinguish the nausea which *Ipecac.* causes and cures from that of other drugs. The distinguishing quality is the *persistence* of the nausea: there may be a constant desire to vomit while vomiting nevertheless does not take place: or if the nausea ends in vomiting it is not thereby relieved even for a short time. The nausea and vomiting are due to the local effect of the drug on the gastric mucous membrane and the medullary centre is unaffected. Consequently, from the homeopathic point of view, its value is proportionate to the local causation of its characteristic symptoms. There is a profuse secretion of saliva but the tongue is not markedly coated and may even be clean. This is at once a distinction between the effects of *Ipecacuanha* and *Antim, Tart.* The vomit may contain bright arterial blood. This

nausea characteristic of *Ipecacuanha* is naturally often associated with disorders of the alimentary canal, but occurs also with respiratory diseases and in febrile complaints (e.g. malaria). Whenever it is present, the drug should at once be thought of and confirmatory symptoms looked for. With the nausea not unnaturally goes a disgust for food and it is noteworthy that the starting point of the milder conditions that call for *Ipecac.* is often indulgence in rich food, pork, pastry, ice-cream, etc.

This emetic quality of the drug has always to be reckoned with and colours the whole symptom picture. The condition of the alimentary canal is largely due to an inflammation of the mucous membrane which lines it and nausea and vomiting are followed or accompanied by frequent loose stools, generally greenish or yellow, (the bile secretion seems to be increased), containing much mucus and generally blood. Characteristically, the hæmorrhages of *Ipecac.* are of bright arterial blood and the power to cause hæmorrhage is one of its noteworthy symptoms. The respiratory tract and the genital (female) show it as well as the alimentary. The stools in fact that *Ipecac.* produces in poisonous doses can justly be called dysenteric and consequently the long standing use of the drug as a cure for amoebic dysentery is of great interest to the homeopathist. Of late years the alkaloid\* of *Ipecac.*, *Emetine*, has been used with great success for amoebic dysentery, but its use has been accompanied by warnings, from sources untouched by any interest in Homeopathy, that care is needed to avoid over dosing, because the symptoms of *Emetine* excess resemble so closely those of the disease that a patient may be gravely poisoned under the impression that his illness is specially refractory. (To be continued).

—The Homeopathic World.

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# হ্যানিমান

হোমিওপ্যাথিক বাঙ্গালা মাসিক পত্র ।

১২৯১, বহুবাজার স্ট্রীট, কলিকাতা ।

বার্ষিক মূল্য—সডাক ২৫০ মাত্র অগ্রিম দেয় ।

সম্পাদক—ডাঃ আর, আর, ঘোষ, এম, বি, ( রিটার্ডার্ড এসিট্যান্ট সার্জেন ) ।

কলিকাতার খ্যাতনামা হোমিওপ্যাথিক চিকিৎসকগণ কর্তৃক পরিচালিত ।

হ্যানিমানেৰ অৰ্গান ও কেণ্টেৰ হোনি-ফিলজ্‌ফিৰ সরল বঙ্গানুবাদ, ঔষজ্যবিজ্ঞান, চিকিৎসিত রোগীর পুষ্টিপুষ্টি বিবরণ ও প্রস্রাবের সাহায্যে মফঃস্বলের চিকিৎসক, গৃহস্থ ও শিক্ষার্থিগণের সন্দেহ ভঞ্জন করিয়া সহজ ভাবে হোমিওপ্যাথি শিক্ষা দেওয়া হয় । একরূপ মাসিক পত্র এই নূতন এবং সৰ্ব্বত্র সমাদৃত । আজই গ্রাহকশ্রেণীভুক্ত হউন ।

বি, সি, ধর এণ্ড ব্রাদার্স ।

বিশুদ্ধ আমেরিকান হোমিওপ্যাথিক ঔষধালয় ।

৮১নং ক্লাইভ স্ট্রীট,—কলিকাতা ।

টিউব শিশিতে ড্রাম /১০ ও /১৫ পয়সা ।

আমরা আমেরিকান বিখ্যাত “বরিক এণ্ড টেফেলের” নিকট হইতে বিশুদ্ধ হোমিওপ্যাথিক ঔষধ, শিশি, কর্ক, গ্লোবিউলস, স্ফুগার অব মিল্ক ও পুস্তক ইত্যাদি প্রচুর পরিমাণে আমদানি করিয়া বাজার অপেক্ষা সুলভ মূল্যে বিক্রয় করিতেছি । ইহা বাতীত বাঙ্গালা পুস্তক, কাগজের কেশ, কাঠের কেশ, থারমোমিটার, পিচকারী ও চিকিৎসা সম্বন্ধীয় যাবতীয় দ্রব্যাদি অধিক পরিমাণে ঠেকে মজুত রাখিয়া সম্তদরে বিক্রয় করিতেছি ।

মফঃস্বলের অর্ডার বিশেষ যত্নের সহিত অতি সত্বর পাঠাইয়া থাকি । কলেরা ও গৃহ-চিকিৎসার ঔষধপূর্ণ বাল্ল—ফোটা ফেলা যন্ত্র ও পুস্তকসহ যথাক্রমে ১২, ২৪, ৩০, ৪৮, ৬০, ও ১০৪ শিশির মূল্য যথাক্রমে ২৫০, ৩৫০, ৪৫০, ৬৫০, ৭৫০ ও ১২৫০ টাকা, মান্ডলাদি স্বতন্ত্র । বিজ্ঞাপনের আড়ম্বর দেখাইতে অনিচ্ছুক, একবার পরীক্ষা প্রার্থনীয় ।

এলোপ্যাথিক ষ্টোর, ১৪১২ বনবিল্ডেন লেন, কলিকাতা ।

[ নূতন হোমিওপ্যাথিক পুস্তক । ]

ডাক্তার শ্রীজিতেন্দ্রনাথ মজুমদার, এম্ ডি, এল্ এম্ এক বি, কৃষ্ণ

হোমিওপেথিক

## চিকিৎসা-সার

মূল্য ২।০ টাকা, ডাকমাণ্ডুল স্বতন্ত্র ।

গৃহস্থ এবং চিকিৎসকমাত্রেরই এই পুস্তক রাখা উচিত । ইহাতে নূতন ঔষধ সকল সন্নিবেশিত হইয়াছে এবং ঔষধ সকলের প্রভেদ ও অতি সরলভাবে ও সংক্ষেপে বর্ণিত হইয়াছে । অধিক কি, এই পুস্তকের সাহায্যে প্রায় সকল রোগেরই চিকিৎসা অতি সহজেই করা যায় ।

কলেরা বা

## ওলাউঠা-চিকিৎসা ।

এই পুস্তকে ওলাউঠার ইতিহাস, রোগতত্ত্ব, চিকিৎসা, পথ্যাদির নিয়ম প্রভৃতি সকল বিষয়ই বিস্তৃত ভাবে ও সরল ভাষায় লিপিত হইয়াছে ; এবং ডাক্তার বিহারিলাল ভাট্টা, প্রতাপচন্দ্র মজুমদার ও জিতেন্দ্রনাথ মজুমদার মহাশয়দিগের অভিজ্ঞতা ও সন্নিবেশিত হইয়াছে । কয়েকটা রোগীর চিকিৎসা-বিবরণ দিয়া ঔষধ সকলের ব্যবহার বুঝিবার পক্ষে বিশেষ সুবিধাও করিয়া দেওয়া হইয়াছে ।

মূল্য ২।০ টাকা, ডাকমাণ্ডুল স্বতন্ত্র ।

পুস্তক দুইখানি কলিকাতা, ২০৩।১ নং কর্ণওয়ালিস স্ট্রীটে প্রাপ্য ।

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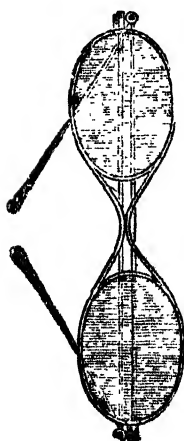


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**A Monthly Journal of Homeopathy and Collateral Sciences**

EDITED BY

P. C. MAJUMDAR, M. D., & J. N. MAJUMDAR, M. D.

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XXVIII.]

MARCH, 1919.

[ NO. 3.

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## ANTHRAX.

It is an infectious disease. Many boils appear in this disease and constitutional symptoms are very prominent. In the blood are found numbers of minute organisms which are said to be the cause. These minute bodies are called *Bacillus anthracis*.

**Symptoms.** After an infection by the poison, the disease appears in a few hours or days. The affected parts itch and become painful. Then appears a spot which grows to a pimple or pustule. When the watery part or pus gets out, ulcers are formed and around those ulcers the lymphatics become red and swollen. Gradually extreme prostration takes place and the patient succumbs. Fever, delirium, restlessness and diarrhoea come on. Ultimately collapse with subnormal temperature. There are two kinds of the disease—external and internal. Their termination is the same, but the internal disease is more serious.



**Treatment.** Lachesis—Dr. Dunham says, if the pustules are black and the lymphatics red, give Lachesis at once. Delirium, prostration and burning are some of the other symptoms.

**Anthracin**—We have great experience with this remedy ; blood is vitiated, much burning and redness of the parts. Higher potencies are better.

Arsenic is also very useful. Fever, burning and great prostration,

**Malandrinum**.--Diarrhoea, black stools, pain in body and pustules like those of smallpox.

We have prescribed Hippozæninum in some cases with great benefit. Sepsis, great weakness, even the failing of vital powers.

## CARBUNCLE.

It is a blood disease, arising from the inflammation of the skin and cellular tissues underneath. It is attended with intense pain and burning.

**Symptoms** There is slight swelling of the skin, which gradually increases ; there is also redness at first. Then there appears a small boil ; mostly the back is the seat of the disease. It increases in size and invades greater portion of the back. Ultimately the parts suppurate, slough is formed, which in time separates and leaves the parts healthy. In the beginning fever is very high which in time assumes a typhoid nature. Generally carbuncle is preceded by either diabetes or Bright's Disease.

**Treatment.** General idea is that carbuncle is a surgical disease and always requires the knife for its cure. This is erroneous. Now-a-days most cases recover under proper medical treatment.

Anthracinum is a great medicine for carbuncle. If burning and other symptoms are not relieved by Arsenic, this remedy should be given at once. We have cured many cases by this medicine. If the fever is high and typhoid symptoms appear, Anthracin is our sheet anchor.

Arsenic is to be thought of in the adynamic form of the disease. High fever, great restlessness and prostration after midnight.

Apis is useful in œdematous condition; great swelling, burning, stinging pains, drowsiness.

Belladonna is required at the onset of the fever, delirium &c.

Bufo. is useful in the beginning of the disease.

Carbo veg.—Affected parts become black, fetid pus and air oozes out of the wound.

Hepar s.—Excessive suppuration, and pain in the parts, outer parts hard and tender.

Lachesis is often useful in gangrenous state and in typhoid conditions. Parts become black, black blood is flowing out of the wound.

Nitric acid—Much burning and hemorrhage of bright red blood. Extreme weakness and copious sweat.

Secale cor—Heat unbearable, sepsis, pulse weak.

Silicea—Ulcers formed, fetid pus.

Tarantula—Outer parts much swollen and red, just,

like erysepalus, chills and fever, headache, delirium, retention of urine, excessive pain and perspiration.

Pressure on the parts to be avoided. If not much fever, nourishing food should be given. Perfect rest in bed must be enjoined. No kind of mental agitation should be allowed.

## DISEASES OF THE NERVOUS SYSTEM.

Two kinds of diseases are considered under diseases of the nervous system :—one relating to physical ailments and the other to mental diseases. Hahnemann is considered as the first physician who treats mental diseases and gives greater prominence to mental symptoms in selecting homeopathic remedies. We first take up the physical ailments.

### HEADACHE.

It is a very distressing disease and may be considered as a symptom in various diseases.

**Causes** are various. If from rush of blood to the head, it is called congestive headache ; if from loss of blood, anæmic headache, nervous headache, dyspeptic, bilious, etc.

**Treatment.** For congestive headache—Aconite, Belladonna, Glonoin, Aurum, Bryonia, China, Gelsem, Melilotus, Sanguinaria, Nux v. Veratrum vir.

For Anæmic headache—China, Ferrum, Ferrum phos, Arsenic, Ammon carb, Natrum mur, Pulsatilla and Sulphur.

For Reflex headache—Gelsem, Onosmodium and Physostigma.

For Rheumatic headache—Natrium salysilica, Asperin, Colchicum, Rhustox, Bryonia.

For malarial headache—Chininum sulph, Arsenic, China, Cedron, and Natrium mur.

For Dyspeptic headache—Nux v, Podop, Bryonia, Iris, Pulsat, Sanguin, Sepia and Sulphur.

For Nervous headache—Zinc, Argent nit., Platina, Puls, Picric acid, China, Coffea, Silicea.

Aconite—Hemicrania or headache from sun. Fear of death, pulse full and hard.

Belladonna—Headache comes on suddenly and goes off suddenly. Bursting headache increased by sun and noise. Higher potency is generally used.

Bryonia—Heaviness increased by movement. More on the right side. Bilious headache, constipation, irritable temper.

Cyclamen—As if the brain is moving, double vision from chlorosis and anæmia.

Glonoin.—Bubbling in the head; headache from sun-heat.

Ignatia—As if nails were driven in the head. Weekly or fortnightly headache, from grief or sorrow. Hysterical headache.

Lachasis—Great, intense pain, more on the left side.

Natrium mur—Hammering headache, aggravated in the morning, malarial headache, constipation.

Nux vom.—Dyspeptic headache, nausea and vomit-

ing, morning headache, aggravation after food and in open air.

*Onosmodium*—Nervous headache from overstudy and sexual abuse. Eyes are also affected.

*Pulsatilla*—Dyspeptic headache, aggravation in warm room; better in open air. Headache in the afternoon and from diarrhœa.

*Silicea*—Headache from bodily exhaustion, from back of head to eyes, better by pressure.

*Spigelia*—From morning till sunset, more on the left side, from back of head to eyes. Stabbing headache.

*Sulphur*—Top of the head, from excess of blood in the head, from suppressed skin diseases.

*Veratrum virid*—Congestive headache after *Bellad.*, severe throbbing headache, diarrhœa, weakness, palpitation.

*Zincum*—Nervous and hysterical headache and from chlorosis, aggravation after food, bilious vomiting, scanty menses.

*Cimicifuga*—From overstudy, and scanty and painful menses.

*Gelsemium*—Vision dim before headache, from bad news or mental depression, better after sleep.

*Sanguinaria*—Bilious and sick headache, more on the right side, from morning till sunset, throbbing, pricking pains, better by profuse micturition, weekly headache.

#### VERTIGO.

It is a very troublesome disease and difficult of

cure. It is often an accompanying symptom of many diseases.

When there is congestion in the brain and vertigo is the result of it, it is called hyperæmic vertigo and when there is deficiency in blood, it is called anemic vertigo. Hyperæmic vertigo seldom begins in the morning on empty stomach and is worse after taking food ; while the anemic vertigo has the opposite symptoms, always in the morning and better after taking food.

**Treatment** Belladonna is one of the very efficient remedies in hyperæmic vertigo. Flushed face and headache and other Belladon symptoms.

For anemic vertigo—Baryta c., Silicea, Graphites &c.

Aconite—Headache and vertigo from sudden rising, worse by bending forward.

Arnica—From concussion in the brain, from over-eating; dim vision, everything appears turning round.

Belladonna—Vertigo, nausea, worse inside the room, better outdoor, sense of apopleptic fits, falling on the left side.

Calcarea—Morning vertigo, nausea, buzzing in ears.

China—From weakness after loss of fluids, fainting and buzzing.

Graphites—After sleep, falling in front, empty feeling in head.

Lachesia—Vertigo, dim vision, and nausea, worse after sleep.

Nux vom—Morning vertigo, constipation, from

over-eating, face red, feeling of fainting, hypochondriasis

**Pulsatilla**—Evening vertigo, aggravated in the room, better in open air, acidity, nausea.

**Silicea**—Sudden sitting up causes vertigo, or by turning head up, vertigo even in sleep.

**Sulphur**—Vertigo, even in sitting up or lying down, bleeding from nose, chronic vertigo, falling on the left side.

**Zincum**—Chronic vertigo, dim sight, great weakness, buzzing.

In hysterical vertigo—**Theridion**, **Ambra gr**, **Sanguinaria**.

Neurasthenic vertigo—**Zincum**, **Phosph**, **Nux v.**, **Conium**, **Arsenic**, **Ferrum**, **Picric acid**.

Meniere's Disease or aseditory vertigo—**Pulsat**, **Chin**, **Ferrum**.

#### DELIRIUM.

It is also a symptom of diseases. In many acute diseases of the brain it is a prominent symptom. It is sometime mild and at other times it assumes a violent character. Many a time it is attended with somnolency or profound sleep.

**Treatment.** Delirium with fever and excitement of brain—**Bellad**, **Cactus**, **Hyoscy**, **Opium**, **Stramon** and **Verat vir**. **Aconite** and **Bryonia** are also useful.

For anxiety and fear—**Acon**, **Bellad**, **Opium**, **Puls**, **Silicea** and **Stramon**.

For getting up in bed and trying to go—**Belladon**, **Aconite** and **Bryonia**.

**Howling**—Bell., Rhust, Stramon and Lachesis.

**Dreams and fear**—Bell., Hyosc, Stramon and Opium.

**Aconite**—Fear of death, patient speaks about his death. Fever heat, pupils dilated, sitting up in bed.

**Apis**—Sleepiness, muttering speech, fear of being fired on.

**Arnica**—Drowsy, waking dreams, does not like to answer.

**Belladon**—Violent delirium, trying to escape, congestion in head, sleepiness but cannot sleep. Seeing terrible things, grating of teeth, trying to bite.

**Bryonia**—Delirium at night, business talks, sees visions on closing eyes, hasty speech, open mouth.

**Gelsemium**—Delirium during sleep, muttering with half sleep, sleeping during delirium.

**Hyoscyamus**—Speaks correctly when asked but delirium again, speaking nonsense, piercing cry. We have cured many cases with this remedy alone. Various potencies are to be tried before leaving it. A little girl under our care had delirious talks day and night. Hyoscyamus 200, one dose, cured her. We first tried the lower potency. In other cases higher potencies were of no avail, but lower cured them.

**Lachesis**—Muttering delirium, especially at night, drowsiness, red face, tries to speak the whole time. From one subject to another. Fear of death. Lachesis cured some desperate cases in our hands.

**Lachnanthes**—face red, eyes sparking, talking much. We have cured a bad case of typhoid with



sparkling eyes and circumscribed dusky redness of the cheek, with this remedy.

**Nux mosch**—Drowsiness, loud talking and laughing, speaking loudly with extreme prostration.

**Opium**—Mild or furious delirium. Speaking, laughing and trying to escape, deep red face. Patient thinks that his body is enlarged and as if he is not yet born. Profound drowsiness. A child was saved by Opium with delirium and convulsion.

**Phosphoric acid**—Mild delirium, muttering, apathy, and drowsiness,

**Rhustox**—Delirium with high fever, dullness of brain, restlessness. Answers slowly but correctly.

**Stramonium** for furious delirium, trying to bite and strike, laughing, whistling, whole body seems to be burnt, dancing and loud speaking, rage.

#### . SLEEP.

Sleep is a physiological state of the mind and is only considered as a morbid state when it is not properly performed. Stupor or coma is a condition not natural and is an accompaniment of many diseases in their bad state. When sleep is in its unnatural state, then we are called upon to treat it.

**Treatment.** If after taking medicine good sleep takes place, we know it is all right, otherwise we are to repeat the medicine.

**Apis**—Sleepiness with piercing cry, brain cry. In cases of meningitis we get this kind of sleep.

**Belladonna**—Deep sleep and snoring, starting

during sleep, half closed eyes. In many febrile conditions and in teething of children this takes place. Sleepiness but cannot sleep.

Lachesis—Great drowsiness, all symptoms are aggravated after sleep. Startling as going to sleep followed by sleeplessness.

Nux mosch—Unconquerable sleepiness, long sleep, tongue dry.

Insomnia is another very distressing state in many diseases. Large quantity of sleeping medicines of the allopathic physicians is always harmful. These so-called "sleeping draughts" bring on injurious weakness in the brain.

Aconite—Restlessness and insomnia, from fever and pain.

Belladonna—From nervous irritation and in children and fat people.

Coffea—Sleepless from bodily and mental irritation, also from bad or good news.

Cypripedium—Children sleepless the whole night, but very jolly and playful. From nervous debility and in women from uterine and ovarian irritation.

Hyoscyamus—Nervous irritation, dreams after fever, typhoid.

Moschus—In hysteric people. Sleepless after abuse of chloral. I have used this remedy in some bad cases and with good result.

Nux vom—Excessive mental work and no physical exercise, sleep disturbed and sleeps soundly late in the morning. Constipation or diarrhoea, wind in stomach.

Opium—Wide awake or sleepy, not sound sleep. Sleepless from bad news as from drinking hard.

Passiflora—From nervous weakness, anxiety and sleepless from headache.

Keep the mind calm before going to bed. Light food should be taken at night. Not going to bed just after meals. -

#### HYDROCEPHALUS.

Acute hydrocephalus or basilar or tubercular meningitis is caused by tubercular infection. It generally takes place in children.

When it attacks a child, the first symptoms are headache, restlessness, vomiting, and child loses his appetite and gradually emaciates. Then fever comes on, headache aggravated and with delirium and drowsiness appears. The patient is disturbed by lights and noise and often piercing cry called the "brain cry." Pupils may be dilated or contracted, twitching of the muscles and convulsion. Respiration rapid and often sighing. Temperature in ordinary cases is 100 to 101 or 102 F. I have seen a case where temperature went up to 107 before death. In another case it went down to 93 F. Prognosis is very bad in this disease.

**Treatment.** Belladonna is one of our great remedies in the beginning of this disease. Teething children are much benefited. High fever, flushed face, intense headache, starting up in sleep and drowsiness.

Bryonia is also a great remedy, especially when exudation is about to take place. Brain cry, suppression of urine or if from retrocession of eruptions, measles &c.

**Arnica**—From injury, high fever, pain in body. In a case of mine Arnica high had the desired effect failing with other medicines. I believe absorption of the fluid in the brain is better effected by this medicine.

**Cuprum metallicum**—It is useful in the advanced stage of the disease and more so if convulsion takes place.

**Helleborus** is also useful in very bad cases. Profound coma with brain cry, strabismus, urine scanty and high coloured, jerking of the hands and feet, sometimes one side only.

**Digitalis** is used in all stages of the disease—vomiting, convulsion, emaciation, scanty urine, pulse small, frequent and irregular. It is more useful for scrofulous and tuberculous cases. Dr. Bæhr speaks very highly of it.

**Iodoform**—Pain in the base of the brain, moving the head from side to side, headache, pupils dilated, extreme weakness of the hands and feet. Many symptoms of meningitis are found in the proving of this drug and require trial. I used it in some cases but no satisfactory result.

**Zincum**—Hartman recommends it in the beginning. We have used it in the later stages and have had good effect. Extreme prostration twitching of hands and feet, comatose condition and moving of the head.

**Apis** is one of our great help in the beginning ; brain cry, grating of teeth, restlessness, urine suppressed, diarrhoea with green stools. Perspiring head and convulsion.

Sulphur—When Zincum fails, good for scrofulous and tuberculous cases and when other medicines fail.

Calc. carb is very useful in tuberculous cases. Glandular swelling, sweaty head and cold feet. In a very bad case with diarrhœa, open fontanelles and emaciation we got better effect from Calc phos.

Kali Iod—We had seen a very severe case of meningitis cured with this remedy by Dr. B. L. Bhaduri, when the child was declared hopeless by other physicians. Medicine should be repeated very carefully. Even in bad cases we give three or four drops in 24 hours. Medicine should not be changed too often. Sometimes with higher and sometimes lower potencies we cure our cases. I have seen Cina very useful in this disease.

P. C. M.

#### PRIZE DISTRIBUTION OF THE CALCUTTA SCHOOL OF HOMEOPATHY AND THE HOMEOPATHIC MEDICAL COLLEGE.

The distribution of prizes and diplomas to the boys of the Calcutta School of Homeopathy and the Homeopathic Medical College came off on Friday, the 6th March in the premises of the Calcutta Homeopathic Hospital, 265, Upper Circular Road, under the presidency of the Hon'ble Mr. Justice Greaves. The proceedings took place in the compound under a "Shamiana" beautifully decorated for the occasion. Justice Greaves arrived punctually at 5-30 P. M. and after some vocal and instrumental music, the Secretary, Dr. J. N. Majumdar, read the report which ran as follows :—

The Calcutta School of Homeopathy has been in existence now about thirty-seven years having been started in the year 1881.

Dr. Protap Chandra Majumdar, one of the leading men of the Homeopathic profession to-day, then a young enthusiast, approached the leaders of the profession with the proposal of opening a Homeopathic School. He was discouraged because it was held that it would not be possible to equip a college with all the necessary appliances for a regular Homeopathic medical education as there was no Homeopathic hospital then. How could the boys get practical training? But he was not to be daunted. He said he would make a small beginning and in this enterprise he was helped by that great medico-philosopher Dr. Leopold Salzer, now gone to his eternal rest. He began gathering students and started a small school in his own house in 1881. As this arrangement was not very satisfactory, a regular school was opened on 15th February 1882 at 45, Benatolla Street with Babu Soshi Bhusan Mukerjee as Secretary and Doctors Protap Chandra Majumdar, Behari Lal Bose and M. M. Bose as teachers. Dr. Salzer also visited the school from time to time and delivered lectures. Such were the beginnings of this institution. From that time the school has graduated many students and today we find our passed students not only all over Bengal but in such distant places as Punjab, Bombay and the Madras Presidencies. The school had no home of its own. After shifting from place to place it has at last found a permanent abode in this Calcutta Homeopathic Hospital, founded by our worthy colleagues Drs. D. N. Roy and others. Last year Sreemati Barahi Devi, wife of Dr. P. C. Majumdar, added a new wing to the hospital at a cost of nearly Rs. 6,000/- and now the school lectures are held in these rooms. Besides we have a chemical laboratory and a small pathological museum and the superintendent's office.

The school has an efficient staff of teachers most of whom are graduates of the Calcutta Medical College. That so many regularly qualified men have a leaning towards homeopathy is indeed a very healthy sign of the times and I verily believe that unless we have a large number of regularly qualified men among us, we shall not be able to stand the test of time in this progressive and critical age. It was casually but very justly remarked by one of the heads of the Medical Department, that it mattered little what pathy or system men practised, so long as they were regularly qualified men.

The college, however, has not been indifferent to its alumni, for although it has been very reticent in taking Homeopaths of questionable qualifications, many of whom have aspired to be its teachers, it counts among its faculty three of its passed students—Drs. Rai Mohan Banerjee, Kesorilal Bagchi and Manmathanath Ghosh.

The college has had the support and encouragement of such eminent men as the late Rev. Father Lafont, Sir Jagadis Chandra Bose, Sir P. C. Roy, S. C. Mahalanabis, Col. K. P. Gupta, Raja Peari Mohan Mukerjee, the late Sir Guroodas Banerjee, Sir Lawrence Jenkins, Maharaja Prodyot Kumar Tagore, the late Prince Baktyar Shah, the Hon'ble Surendra Nath Banarjee, Justice Sir Asutosh Choudhuri and others.

This year we have 118 students. The income was Rs. 2,715 and expenditure Rs. 2,645-13-6. Balance in hand Rs. 68-2-6.

Our particular thanks are due to our worthy president Dr. D. N. Roy who unfortunately is unable to be present on account of illness and our Dean Dr. P. C. Majumder. Our thanks are also due to Lt. H. C. Chatterji, Drs. A. N. Mukerji, M. N. Bhowmic, M. N. Bose, K. K. Roy, K. N. Banerji, N. C. Nandy, R. N. Banerji and others for the interest they have taken in delivering lectures and giving clinical instructions.

Our particular thanks are due to the Hospital authorities for having offered us this shelter and also for the abundant clinical facilities the students derive from the hospital. I should be lacking in my duty if I do not mention the name of Dr. M. N. Ghose, but for whose untiring energy and whole-hearted devotion it would have been impossible for us to work, during these trying times.

Miss Greaves then very kindly gave away the prizes which consisted of three medals, twenty sets of books and thirty-five diplomas and certificates.

The president then spoke very encouragingly to the students who received their diplomas and certificates. He also thanked the founder of the school, Dr. P. C. Majumdar, the Managing Committee and particularly the Secretary for the economical way in which the institution had been managed.

With a hearty vote of thanks to the chair proposed by Mr. N. C. Sirkar, the proceedings came to a close.

Before leaving the Hon'ble Mr. Justice Greaves and Miss Greaves went round the hospital with Dr. J. N. Majumdar and were quite pleased with what they saw.

## EPIDEMIC INFLUENZA OF 1919.

We cannot call the present form of influenza influenza. We call it a sort of plague or pestilence in the form of influenza.

The treatment of plague or pestilence, says our great master, is easy. For one remedy is sufficient to kill the virus or germ of plague. He gives only two sections for investigating the totality of symptoms of epidemic or sporadic diseases. It is quite immaterial



whether or no something similar has ever appeared in the world under the same or any other name. The novelty or peculiarity of a disease of that kind makes no difference either in mode of examining or treating it as the physician must any way regard the pure picture of every prevailing disease as if it were something new and unknown, and investigate it thoroughly for itself, if he desires to practise medicine in a real radical manner, and never substituting conjecture or actual observation, never taking for granted that the case of disease before him is already wholly unknown, but always carefully examining it in all its phases ; and this mode of procedure is all the more requisite in such cases, as careful examination will show that every prevailing disease is in many respects a phenomena of unique character differing vastly from all previous epidemics to which certain names have been falsely applied with the exception of those epidemics resulting from contagious principle that always remains the same, such as smallpox and measles &c.

It may easily happen that in the first case of an epidemic disease that presents itself to the physician's notice, he does not at once obtain knowledge of its complete picture, as it is only by a close observation of several cases of any such collective disease that he can become conversant with the totality of its signs and symptoms. The carefully observing physician, can however, from the examination of mere first and the second patients often arrive nearly at a knowledge of the true state as to have in his mind a

characteristic portrait and even to succeed in finding a suitable homœopathically adopted remedy for it.

The physician who has already in the first case been able to choose a remedy approximating to the homeopathic specific, will, from the subsequent cases, be enabled either to verify the suitability of the medicine chosen or to discover a more approximate homœopathic remedy.

A few days ago one Babu Kunja Behari De, B. L., pleader at Serajgunge, accosted me on the road and told me you saved many persons from the jaw of death in the present dreadful influenza by your specific, *Eupatorium Perfoliatum* 30th potency, and there was not a single failure for the wonderful efficacy of your specific. The gentleman twice or thrice asked me for a specific for the present sort of influenza. After my investigation was over I told him "I have found out the specific and that specific was *Eupatorium Perfoliatum*."

It is true there cannot be any specific for any disease, but as for epidemic or endemic or sporadic diseases caused by specific virus or influence of something it must develop the same symptoms in all its subjects, there must be therefore a specific as for the epidemic or endemic. Hence the physician must not run after different remedies. In the course of treatment, he may administer now and then some antipsoric, anti-syphilitic or anti-sycotic according to the history of the patients treated.

We request our readers to consult Dr. Hale's

New Remedies, Symptomatology on Eupatorium Perfoliatum and the writer's ভৈষজ্যতত্ত্ব । We cite a few important symptoms from the book.

#### CATARRHAL SYMPTOMS AND THE CHEST.

Flaming coryza ; sneezing ; drowsiness.

Hacking cough in the evening.

Cough with soreness and heat in the bronchi.

Cough aggravated in the evening.

Violent cough with soreness in the chest.

Difficulty of breathing with anxious countenance, perspiration and sleeplessness.

Aching pain under the left breast with inability to lie on the left side.

Grating sensation in the chest at every deep inspiration.

Asthma and bronchitis when dyspnoea is great and obliging the patient to lie with head and shoulders high.

As to generalities it has great soreness and painfulness of the whole body and extremities as if he has been bruised or beaten.

NILAMBER HUI,  
Serajgunge, (Pabna).

21-3-19.

## THE "VITAMINES" OR "ACCESSORY FACTORS" IN RELATION TO DIETARY PROBLEMS ARISING FROM THE WAR.\*

BY A. BRUCE MACALLUM, M. D., Toronto, Canada.

Chick and Hume have made the most important contribution of recent years to our knowledge of the antineuritic and antiscorbutic vitamins. Much of the earlier work on scurvy was published before the existence of "vitamines" was known. They surveyed the earlier work in this field and applied the vitamine hypothesis to it in the light of our present knowledge. They find that the anti-scorbutic vitamin has a general distribution throughout animal and plant tissues. They have demonstrated that dried vegetables, seeds and cereals are lacking in their antiscorbutic properties but that these are extremely active when the seeds and grains are moistened and allowed to germinate. Their opinion is that when the tissue is dried the cell is disorganized and that the antiscorbutic principle undergoes coincident destruction, but is created anew by the activity of cell life in the germinating grains. Dried potatoes are not antiscorbutic and contrary to expectation, cow's milk is relatively poor in this accessory. Fresh meats contain this vitamine but large quantities are necessary to protect the organism from the onset of scurvy. Dried foodstuffs of all varieties are also deficient in this respect. Potatoes are the principal article of diet which keep the people of this continent supplied with antiscorbutics while all root crops which are stored with the cells in the moist condition (onions, carrots, beets, turnips, &c.) are also efficient as prophylactics against scurvy.

Domestic cooking of vegetables has practically no effect on the activity of their antiscorbutic properties as these pass

\* New York Medical Journal.

over into the juices. Slow drying the foodstuffs even as low as 37 degrees C. will completely destroy the antiscorbutic vitamins, and pasteurized, desiccated and condensed milk and dried milk substitutes are the source of most of our infantile scurvy. Fruit juices produced by modern factory methods of canning are not rich in antiscorbutics and their activity is lost if chemical preservatives are used ; while if the reaction of the preserving medium is alkaline, such foodstuffs will lose their protective value in a short time. In the case of fresh and preserved fruit juices the acidity is the important factor in preserving the antiscorbutic vitamin for long periods. Chick suggests the onion as the ideal antiscorbutic, especially for troops, as it stands the conditions of transport better than other vegetables.

The antineuritic (beri-beri) vitamin is concentrated in certain parts of the plant tissue—the germ and aleurone cells of the pericarp of all cereal grains and seeds. The endosperm is totally deficient in this element. It can remain unchanged for months in the dried condition and has been isolated in a more or less pure state by chemical reagents. Of all the vitamins it is relatively the most resistant to variations in temperature, moisture and storage conditions. The principal source is mentioned above, but it is also found in all fresh meats, fresh and dried vegetables and in fresh milk and eggs. Yeast is a substance exceedingly rich in this compound. Ordinary domestic cooking apparently does not affect the stability of this particular vitamin and temperatures around 100 degrees C. do not impair its physiologic properties, nor do the ordinary methods of preserving canned fruit and vegetables. Salted, tinned and dried meats are not antineuritic, especially after long periods of cold storage. Ordinary commercial cold storage up to five months' duration shows little or no degeneration, and pasteurizing processes do not

show any depreciation in antineuritic properties by biologic tests on pigeons with experimental beri-beri in the case of milk. Temperatures above 120° degrees C. for half hours, however, render inactive the beri-beri vitamine. White flour has been found to be lacking in antineuritic properties, as it is made almost wholly from the endosperm, but the present war flour, which contains a higher proportion of the aleurone layer and germ, is a decided improvement on its predecessor in respect to its beri-beri vitamine.

There is also an accessory which is present in butter fats and cod liver oils which, as Osborne and Mendel showed, is essential for maintenance of health. Edible vegetable commercial fats and oils and lard are lacking in this compound, whose identity is as yet unknown. It is unaffected by treatment with steam, methods used for hydrolyzing fats and remains unchanged by cold storage conditions for several months. At the present time in Europe, especially in enemy territories, where fats of all varieties are far short of ordinary requirements, all types of edible fats have been used for substitutes, and even in this case the experiment has met with more or less failure. Their experience has shown that fat cannot entirely be dispensed with, even though the extra calorific energy is supplied by means of carbohydrate; a fixed amount of fat is essential and it must contain this fat soluble accessory. Drummond and Halliburton, by means of biologic tests with rats, demonstrate that the butter substitutes in England vary with respect to their content of this fat soluble accessory. The more expensive forms, which are made from the "oleo oils" or lower melting point fractions of beef fats, possesses this particular accessory, and are comparable to butter in this respect. Butter substitutes made from vegetable oils were on the contrary, deficient in this compound, as well as lard, nut butters prepared from nuts.

and vegetable oils. The cheaper forms of butter substitutes in America are usually prepared with vegetable oils as the principal constituent, and it would be perhaps advisable to have butter fat up to 10 per cent incorporated in these butter substitutes to render them equivalent to the growth-promoting properties of the butter fat. Lard cannot be used to secure the biologic effect produced by butter fats and high grade beef fat oleomargarines. The deficiency of this fat soluble accessory does not produce any specific symptoms, other than xerophthalmia and general chronic malnutrition.

( To be continued ).

—*The North American Journal of Homeopathy.*

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OF

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# হ্যানিমান

হোমিওপ্যাথিক বাঙ্গালা মাসিক পত্র ।

১২৯১, বহুবাজার ষ্ট্রীট, কলিকাতা ।

বার্ষিক মূল্য—সডাক ২৫০ মাত্র অগ্রিম দেয় ।

লস্পাদক—ডাঃ আর, আর, ঘোষ, এম, বি, ( রিটার্ডার্ড এসিট্যান্ট সার্জন্স ) ।

কলিকাতার খ্যাতনামা হোমিওপ্যাথিক চিকিৎসকগণ কর্তৃক পরিচালিত ।

হ্যানিমানে অর্গান ও কেন্টের হোমি-ফিলজফির সরল বঙ্গানুবাদ, ঔষধজ্ঞাবিজ্ঞান, চিকিৎসিত রোগীর পুষ্কানুপুষ্ক বিবরণ ও প্রশ্নোত্তর সাহায্যে নফস্বলের চিকিৎসক, গৃহস্থ ও শিক্ষার্থীগণের সন্দেশ ভঞ্জন করিয়া সহজ ভাবে হোমিওপ্যাথি শিক্ষা দেওয়া হয় । একরূপ মাসিক পত্র এই নূতন এবং সর্বত্র সমাদৃত । আজই গ্রাহকশ্রেণীভুক্ত হউন ।

বি, সি, ধর এণ্ড ব্রাদার্স ।

বিশুদ্ধ আমেরিকান হোমিওপ্যাথিক ঔষধালয় ।

৮১নং ক্লাইভ ষ্ট্রীট,—কলিকাতা ।

টিউব শিশিতে ড্রাম /১০ ও /১৫ পয়সা ।

আমরা আমেরিকার বিখ্যাত “বরিক এণ্ড টেফেলের” নিকট হইতে বিশুদ্ধ হোমিওপ্যাথিক ঔষধ, শিশি, কর্ক, গ্লোবিউলস্, সুগার অব মিল্ক ও পুস্তক ইত্যাদি প্রচুর পরিমাণে আমদানি করিয়া বাজার অপেক্ষা সুলভ মূল্যে বিক্রয় করিতেছি । ইহা ব্যতীত বাঙ্গালা পুস্তক, কাগজের কেশ, কাঠের কেশ, থারমোমিটার, পিচকারী ও চিকিৎসা সম্বন্ধীয় যাবতীয় দ্রব্যাদি অধিক পরিমাণে ঠেকে মজুত রাখিয়া সম্তাদরে বিক্রয় করিতেছি ।

নফস্বলের অর্ডার বিশেষ যত্নের সহিত অতি সত্তর পাঠাইয়া থাকি । কলেরা ও গৃহ-চিকিৎসার ঔষধপূর্ণ বাস্ক—ফোঁটা ফেলা যন্ত্র ও পুস্তকসহ যথাক্রমে ১২, ২৪, ৩০, ৪৮, ৬০, ও ১০৪ শিশির মূল্য যথাক্রমে ২১০, ৩৮০, ৪৮, ৬৮, ৭১০ ও ১২১০ টাকা, মাণ্ডলাদি স্বতন্ত্র । বিজ্ঞাপনের আড়ম্বর দেখাইতে অনিচ্ছুক, একবার পরীক্ষা প্রার্থনীয় ।

এলোপ্যাথিক ষ্টোর, ১৪১২ বনফিল্ডস্ লেন, কলিকাতা ।

[ নূতন হোমিওপ্যাথিক পুস্তক ! ]

ডাক্তার ত্রীজিতেন্দ্রনাথ মজুমদার, এম্ ডি, এল এম এফ বি, কৃত

হোমিওপেথিক

# চিকিৎসা-সার ।

মূল্য ২।০ টাকা, ডাকমাণ্ডুল স্বতন্ত্র ।

গৃহস্থ এবং চিকিৎসকমাত্রেয়ই এই পুস্তক রাখা উচিত । ইহাতে নূতন ঔষধ সকল সন্নিবেশিত হইয়াছে এবং ঔষধ সকলেব প্রভেদও অতি সরলভাবে ও সংক্ষেপে বর্ণিত হইয়াছে । অধিক কি, এই পুস্তকের সাহায্যে প্রায় সকল রোগেরই চিকিৎসা অতি সহজেই করা যায় ।

কলেরা বা

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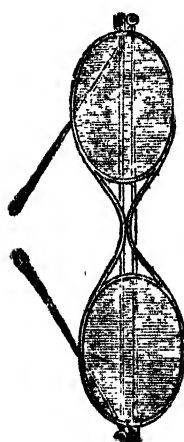
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EDITED BY

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XXVIII.]

APRIL, 1919.

[ No. 4.

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## HAHNEMANN ANNIVERSARY.

The birthday of Hahnemann was celebrated by the members of the Calcutta Homeopathic Society on the 10th of April at 265 Upper Circular Road in the premises of Calcutta Homeopathic Hospital. Among those present we noticed Hon'ble Rai R. C. Pal Bahadur, C. I. E., Drs. J. N. Majumdar, G. L. Gupta, B. K. Bhar, S. C. Mitter, K. K. Roy, R. M. Banerji, K. N. Banerji, and others. There was vocal and instrumental music. Light refreshment was served. Dr. Aswini Kumar Bhattacharya, the secretary and Manmatha Nath Ghose, the assistant secretary were all attention to the guests. The absence of Dr. P. C. Majumdar was keenly felt, he being away at Benares on account of ill health. Dr. D. N. R. S., W. Younan and others also did not attend.

Altogether a most pleasant and enjoyable evening was spent.



## SURGEON-GENL EDWARDS' SPEECH.

### WANTED A MINISTRY OF PUBLIC HEALTH.

The following is the full text of Surgeon-General Edwards' speech reviewing the work of the Medical Department in the Imperial Legislative Council to-day :—

\* My illustrious predecessor, the late Sir Pardey Lukis, when he addressed this Council two years ago, pointed out that scientific investigation and preventive medicine can never again be relegated to the background. Medical research is now admitted on all sides to be a vital part of Government activities. The appalling pandemic of influenza which swept over and ravaged the whole of India has drawn attention in an acute form to the urgent necessity not only of developing all our existing arrangements for research but also of applying the knowledge so acquired by means of efficiently organized public health services. I wish to say something further on the point but before doing so I will give a brief review of our activities during the last two years. The exigencies of the war demanded the reversion of the majority of the officers of the Bacteriological Department to military duty. They formed the major part of the staffs of the central laboratories in Mesopotamia. Those remaining in India were engaged almost entirely on war work, that is, in the preparation of vaccines intended to protect the troops in India and overseas from typhoid and paratyphoid fever and cholera, I am proud to be able to say that, in spite of the enormous

demands for vaccines, we have been able to meet such demands without indenting on the Home authorities, and we supplied His Majesty's forces in Mesopotamia, Africa, Egypt and Palestine, as well as in India. The Central Research Institute at Kasauli developed its vaccine production to an almost incredible extent. The yearly average before the war was eighteen and a-half thousand cubic centimeters. During the war it rose to over  $2\frac{1}{2}$  million cubic centimeters, and included anti-typhoid, cholera, pneumonia, and influenza vaccines. From a monetary point of view alone the value of these Kasauli vaccines for the period of the war was about half a million sterling. In addition to turning out these vaccines Kasauli also equipped three laboratories, two of which were sent overseas. I am sure the Council will agree with me that the greatest credit is due to Lieut-Col. Harvey, Director of the Institute, and his staff for their excellent and most successful work. The Bombay Bacteriological Laboratory at Parel has also enormously developed its production of vaccines other than plague, which latter is their speciality and the manufacture of which continued. The total vaccine issued from this Laboratory to the troops in India and abroad was over  $1\frac{1}{2}$  million doses, and in addition to this Director Lieut-Col. Glen Liston from June, 1916, undertook the supervision of the bacteriological work in the base hospitals of Bombay. The Pasteur Institute, Kasauli, also assisted in the war, for it treated no less than 2,177 soldiers sent from the war areas overseas. To all

medical officers connected with the medical laboratories of India, and who in consequence were denied the privilege of proceeding on active service, I now take this opportunity of offering my thanks for their unselfish devotion to duty and for their loyal co-operation.

#### SPLENDID RESEARCH WORK.

In spite of the war and the absence of so many of our officers, we have, nevertheless, succeeded in carrying out a considerable amount of research. An inquiry into diabetes was continued by Major McCay and his co-workers in Calcutta, and a series of papers which are of great scientific value are being published in the *Indian Journal of Medical Research*. A report has just been submitted by the same officer on the treatment of diabetes which is also, in my opinion, of very great importance. The Research Fund has continued to finance the inquiry at Poona on the subject of plague prevention and Dr. Chandra, under the advice of Lieut-Col. Hutchinson and Major Kunharda, has made numbers of experiments concerning the best methods of rat-destruction. This inquiry has yielded good results which will shortly take practical shape. At Karachi Lieut.-Col. Greig, working under the Indian Research Fund Association, continued his valuable work on cholera carriers, and he also investigated the anti-beri-beri value of certain food-stuffs. His expert advice has been of constant value both to me and to the military authorities. Recently he has submitted a most valuable paper on influenza written in collaboration with Captain Maitra. From his

laboratory at Karachi we have also had valuable studies on the curative values of certain drugs such as chenodium oil and thymol used in the treatment of ankylostomiasis. These were contributed by Captain Wrench, R. A. M. C. Lieut.-Col. Greig has just been deputed by the Government of India to proceed with Major Norman White to the Inter-allied Conference at Paris in connection with influenza. Lieut.-Col. McCarrison is on special duty in charge of an inquiry into beri-beri and is investigating other so-called "deficiency diseases." A very important paper on his initial results appeared in the January number of the *Indian Journal of Medical Research*. Three further papers from his pen are in the press and will be published in April. The study of hookworm disease has been pursued by Lieut.-Col. Clayton Lane in Bengal and by Dr. Mhaskar in Madras. The results show that the incidence of hookworm infection is in many places nearly one hundred per cent. They have further shown that this disease cannot only be cured but even eradicated if only the people could be sufficiently educated in sanitary matters. Captain Knowles, who is Director of the Pasteur Institute at Shillong, is now engaged in an investigation as to the mode of infection of kala-azar. He also is being assisted by the Indian Research Fund Association. Mr. Awati has continued his investigation into the bionomics of house-flies and has contributed papers regarding the specific differences of the genus *Musca*. This work is of

much importance, as we know that the house-fly is a terrible carrier of disease. Another insect engaging our attention is the hand-fly and an effort is being made to discover and destroy these pests in their larval state. This investigation is being conducted by Mr. Mitter at Lahore, who has done good work in this direction. Sir Leonard Rogers, among other activities continues to conduct the general direction of an inquiry into the chemistry of Chaulmoogia oil and other oils found useful in the treatment of leprosy. Meanwhile the Mission to Lepers has instituted a trial by qualified medical men and women into the comparative effects of drugs thus prepared. These trials are under the general advice of Sir Leonard Rogers and the mission is being helped financially for this purpose by the Government of India. There are several other lines of research in progress in India, some of them of a highly technical nature.

#### TWO SCHOOLS OF TROPICAL MEDICINE.

From what I have just said I am sure that all will agree that this work is of the utmost importance, and further that it is most necessary that we should give the inhabitants of India every chance of getting a first-class training in medical research in India. Thanks to the energy of Sir Leonard Rogers, a School of Tropical Medicine, with a special hospital of its own attached to it, will shortly be opened in Calcutta, and I have the greatest pleasure in stating that there is every prospect of another School of Tropical

Medicine and Medical Research being shortly opened in Bombay. This school will be based on the splendid Parel Laboratory, which Colonel Glen Liston has by his indefatigable labours brought to such perfection. It will also have a special hospital of its own attached to it. That well known philanthropist Sir Dorab Tata has by a munificent gift of a lakh a year enabled the Bombay Government to proceed with their school, which will not only be well staffed but also have a number of valuable scholarships, including a travelling one, attached to it. We shall thus shortly have the means of giving the best possible training in medical research which will enable students to aspire not only to professorships, but also to the winning of a world-wide reputation. In addition to these schools it is very necessary that we should have at least two institutes of medical research. I want to see an Imperial Institute, comprising an imperial library and bureau of medical research, opened in Delhi, and another institute opened in the Bombay presidency. For the first we must depend on the Government of India, and for the second I have reason to believe that we can rely on the munificence of the Tata family and other wealthy philanthropists of that great presidency. I have just been asked by Sir Dorab Tata if a first-class expert could be found to visit India at Sir Dorab's expense to advise on this matter. So much for research.

#### A MINISTRY OF PUBLIC HEALTH.

**It must be remembered that without a Ministry of**

Public Health, such as is now being instituted in Great Britain, and well organised provincial public health services, the knowledge that we thus acquire cannot be efficiently applied. This at least is my private opinion. A third factor is, however, absolutely essential to the preservation of public health, and that is the education of the masses. Without this the best organised preventive medical service in the world must work in vain. An ignorant populace, not understanding the meaning of advice in the value of orders, will follow the former and will actively or passively resist the latter. District visitors and magic lantern lectures cannot do more than touch the fringe of the dense ignorance of the masses. There is only one way to remove this ignorance. The knowledge of public health, like all other knowledge, must be imparted through the schools and colleges of India. This is essential. I know the difficulty. It is first necessary to educate the teachers. Unfortunately, too, in practically every country in the world the rulers themselves have never received any education in public health. They therefore find it difficult to believe even now in the absolute necessity of giving this instruction in every school throughout the land. I would, indeed, go further than simply teach—I would, in order to impress the vital necessity of this knowledge on the educated classes, make public health, if not a compulsory subject, at least a highly marked optional subject in the matriculation examination of every university in India. I can say without fear of

contradiction that such teaching would alone, without a single additional doctor or a single drug, save India hundreds of thousands of lives and millions of money every year.

#### THE NEED FOR EDUCATION.

To substantiate this last remark of mine I would like, as time permits, to mention a few diseases concerning which every inhabitant of India should have some knowledge. Take hookworm. This parasite affects to a greater or less extent the rural population of the whole of India, in many parts infecting as many as 90 per cent. It causes anæmia and debility. It renders the sufferers unfit for hard work and an easy prey to other diseases. The means of infection is, briefly, as follows: Microscopic larvæ hatch out of eggs deposited with human excrement. These larvæ, attaching themselves to the feet or legs of the next comer, penetrate the skin painlessly, get into the blood-current, so go to the lungs; from the lungs they find their way through the air passages and, working up to the throat, are then swallowed and thus infect the intestinal canal. This debilitating disease, so universal, so universal in India, could be eradicated by the use of properly attended latrines. It is also not a difficult disease to cure. Another disease is guinea-worm which in parts of India is a veritable scourge. It is propagated by minute insects (the *Cyclops*), which act as the intermediary host and are swallowed with drinking water. This disease may be entirely



avoided by straining all drinking water through a cloth as the Jains have been taught to do. Of course boiling the water would also make it safe to drink. Then, again, take malaria itself. How many villagers know that this disease cannot be contracted except through the bite of an infected mosquito, and that the systematic use of mosquito nets, and surface drainage would make an enormous difference in its incidence? Cholera, dysentery and typhoid are due to germs derived solely from human excrement. These diseases can only be contracted by drinking water which has been fouled by such excrement, or by taking contaminated food or milk. Flies which have been feeding on human excrement are the usual source of food contamination. These germs are killed by a temperature of 140 degrees, and therefore by eating only freshly cooked food with clean hands, and drinking only hot fluids you can live without danger in the midst of an epidemic of cholera. Typhus, again, which has recently ravaged the United Provinces, is spread by lice, and can be avoided by cleanliness. That terrible scourge bubonic plague is contracted from the bite of an infected rat-flea. Obviously the way to eradicate it is to keep rats out of houses and grain stores and to destroy them as far as possible during an epidemic. Keeping the skin oiled will probably prevent a flea biting. Lastly take tuberculosis. The knowledge we have of this world-wide disease if acted on would make an enormous difference in its incidence and so save untold misery and

innumerable lives. I think I have said enough to show that if the knowledge of even these few diseases alone was systematically imparted in every school throughout the land, the effect would be of enormous benefit to the entire population of India. With regard to influenza, we have, I regret to say, much to learn. The latest researches go to prove that we have not yet even discovered the germ, which is undoubtedly ultra-microscopic. This and many other diseases call for and are receiving close investigation. I trust that I have not wearied the Council, and that I have said enough to convince every one of the immense importance of medical research, preventive medicine and the education of the whole people of India in public health measures.

—*The Statesman*, March 11, 1919.

## HOOKWORM DISEASE.

LECTURE BY DR. BENTLEY.

An interesting lecture on hookworm disease was delivered at the Dacca Social Service Exhibition by Dr. Bentley, Sanitary Commissioner, before a large audience. The lecturer remarked that when it was realised that something like forty millions of people in Bengal harboured the parasite, that all classes of the community, rich and poor, educated and illiterate, were liable to become infected, and to suffer from the insidious disease produced by this enemy of the human race, it became apparent that active steps must be

taken against this common foe. He was glad that the Bengal Social Service League was prepared to take up the question of hookworm disease. He would want every member of the League as an active helper in the campaign against the parasite and every Bengali who loved his own people and his mother country could not do better than join the league and take an active part in helping to arouse the people to a consciousness of this great enemy, the hookworm, and showing them how it might be defeated and finally expelled from their midst. Having dwelt on the evil effects of the parasites the lecturer explained that fortunately the disease can be treated, and the parasites entirely expelled by suitable treatment and, what was even more important, it could be entirely prevented. He then showed a number of photographs illustrating the remarkable effects of treatment by thymol or oil of chanopodium followed by Epsom salts, which had been successful in effecting many thousands of cures. But although the ability to cure the disease was of great value to the individual, the power to prevent infection entirely was of infinitely greater importance to the community. The task that confronted them in Bengal was a stupendous one, and when they began an active campaign in the Dacca district, as he hoped to do when work had been started elsewhere, he would be glad to know that he could count upon the help of all those present at his lecture that evening.

—*The Statesman*, March 11, 1919.

## THE "VITAMINES" OR "ACCESSORY FACTORS" IN RELATION TO DIETARY PROBLEMS ARISING FROM THE WAR.

*(Continued from page 72, No. 3, Vol. XXVIII).*

The effect of restricted rations and avitaminoses in the allied and enemy countries is difficult to ascertain. Such reports that are available are very general. Scurvy appeared in Glasgow, and the English midland cities, in 1916-17, when there was a scarcity of potatoes. Beri-beri was prevalent for a time during the siege of Kut, when the white troops were on a ration of white flour. This disappeared when replaced by coarsely milled barley flour and Indian cereal grains. Scurvy broke out among the Indian troops in Mesopotamia since they did not eat the meat and horse-flesh ration which protected the white troops from this disease. Substitution of fats deficient in the fat accessory for butter and diminution in the quantity of fat ration has caused outbreaks of xerophthalmia among children in the enemy countries, and the increased amount of carbohydrates in the diet to make good the shortage in protein and fats has caused diminution in the growth of young children.

The prevention of similar occurrences in America resolves itself into a question of price control. It is an unfortunate coincidence that foods deficient in vitamins—as a rule these contain large amounts of, or are exclusively, carbohydrates—are cheap and

abundant. Rising costs of foodstuffs cause the poorer classes—who cannot ration themselves intelligently—to ration themselves according to prices. The increased incidence of pellagra coincident with the rising cost of fresh meats and foodstuffs is an illustration very much to the point in this connection. Consequently, unless information about relative values of foodstuffs is made available to the public and a supply of the essential foodstuffs is available at a moderate price, the majority of the laboring element will unconsciously put themselves on a low plane of vitamine intake. A supply of fresh fruit—bananas, oranges and apples—together with a plentiful supply of potatoes, carrots, turnips, etc., must be placed on the market at a price which should prevent undue economy of consumption of these articles. Butter substitutes should be available and the cheap grades should contain 10 per cent of butter fat to supply the fat accessory if vegetable fats are their base. The increase of the percentage of the flour milled from wheat is a step in the right direction, while all substitutes for wheat flour should contain as much of the germ and aleurone layer as the milling methods will permit. Any tendency to increase the carbohydrates at the expense of the fat and proteins, without at the same time increasing the use of vitamine containing foods, should be restrained since this may hasten the probable onset of deficiency diseases.

—*The North American Journal of Homeopathy.*

## IPECACUANHA.

(Continued from page 48, No. 2, Vol. XXVIII).

The orthodox explanation of the unquestionable curative power of *Emetin* (and *Ipecac.*) in amoebic dysentery and its sequel hepatic abscess, is that the drug has a specific parasiticial power excited on the *Entamæba histolytica*. It must be pointed out that the quantity of the drug that reaches the parasites must be uncommonly small at the best. The dose is injected subcutaneously and is presumed to reach the parasites in the process of being excreted. Its power to cause gastro-enteritis in large doses, however introduced into the body, is certain, and therefore there is little doubt that given medicinally it finds its way to the affected places. But the homœopathist may be pardoned perhaps if he speculates whether the curative effect be not reached by arousing a reaction in the mucous membrane rather than by directly killing the parasite.

Surely this explanation would render more explicable the danger of overdosing, for if the first and foremost effect of the drug be on the tissues, then it is clearly easy to poison them instead of merely stimulating them, but if its primary action be on the parasites then a little too much ought not to be very harmful, as only the excess over and above whatever is taken up by the amœbæ will be available for the mucous membrane. The homœopathist, it is needless to say, welcomes the *Emetine* treatment and will welcome it

even if its pure parasitidal action is finally established, for it is undeniably effective ; but he retains at present his doubt whether there is not here another instance of the use of a "similar" drug, and while he inclines to the view that it acts on tissue rather than on parasite he is not likely to overdose his patients. It should be added that (presuming that the drug acts indirectly), the evidence points to a local tissue action rather than to a stimulus being given to any kind of general blood resistance such as so often combats bacilli ; this consideration again would incline the homeopathist to the use of lower potencies. It is quite possible that, triturations of *Emetine* would be effective by the mouth, but more clinical experience is required here.

Before leaving the subject of the orthodox uses of *Emetine*, it may be noted that the drug has been considerably praised recently for controlling hæmorrhages, (not only intestinal but respiratory and other) in cases where there is no question of the *Entamœba*, and therefore no question either of a parasitidal action. The homeopathist may fairly point out that he has known for a century that *Ipecac.* will control hæmorrhage of a definite type, and that this "discovery" therefore is no novelty to him, but is difficult to explain save as an instance of his basic generalisation.

The central feature of the *Ipecac.* symptom complex is this irritant action on the alimentary canal. Non-homeopathic observers regard the increased bronchial

secretion which it produces as reflex, an effect of the gastric irritation and not the result of direct action upon the tissue of the bronchi—(œdema of the lungs has been noted in animal poisonings). This is a point of considerable interest. Proving's develop many symptoms of bronchial catarrh. The characteristic cough is dry, spasmodic, asthmatic : there may be dyspnœa with wheezing : or at a later stage there may be accumulations of mucus and inability to get rid of it. Both epistaxis and hæmoptysis are common. The drug is most often indicated to the homeopathist in bronchitis and asthma among respiratory diseases and frequently appears to act satisfactorily in potencies. On the other hand it is true that unless there is some degree of gastro-intestinal disturbance and the characteristic nausea, the prescription of the drug is seldom successful. It is a very familiar experience that patients who suffer from one or other of the metabolic disorders which are named "gout" or "gouty" are subject to asthma and bronchitis, and their frequent high arterial tension often results in hæmorrhages. The starting point of their disorder is usually the alimentary canal and accessory glands. If then, the main action of *Ipecac.* is upon this region, it might by causing improvement there, influence favourably the secondary symptoms and it may well be that it is in respiratory complaints of this kind that it succeeds.

(To be continued.)

—*The Homeopathic World.*



# DISEASES OF THE BRAIN.

## CEREBRAL HYPERCÆMIA.

Rush of blood to the brain. Symptoms are produced by pressure of the blood on the brain.

**Causes.** Males are more affected than females and young people are more susceptible to it. Many bad habits are responsible for this disease, such as excess in eating and drinking, taking opium in habitual way. Injury to the head and excessive mental labor are its causes.

**Symptoms.** Flushed and red face. Throbbing of carotids and intense headache. Then delirium and convulsion. Drowsiness, loss of consciousness and other symptoms resembling apoplexy. Fever is always more or less present. Cerebral hypercæmia is of two kinds—active and passive hypercæmia.

**Treatment.** Simple cases are cured by a few doses of Belladonna or Aconite. Headache, buzzing in ear, sleeplessness &c. are cured by a few doses of Bellad. Higher potencies are better. If all these symptoms are not present, but only high fever, dry and harsh skin, restlessness and fear of death are present, Aconite is best suited. Aconite is beneficial in acute, and Belladonna in passive hypercæmia.

Gelsemium is another useful remedy. Vertigo, muscular debility, drowsiness and slight fever are its symptoms. Dr. Baehr recommends it in teething children and nervous people.

Glonoine—Hyperœmia from heat of the sun. Intense headache. Sudden suppression of menses.

Opium is a very good remedy for passive hyperœmia. Face red and bloated, drowsiness, snoring; breathing. We have derived great benefit from this medicine, especially when a simple case is going to be a serious one.

If it is caused by external injury, Arnica is the first remedy to be indicated. Failing with this, Hypericum is the next remedy to be thought of.

We have cured some bad cases with Atropium 3x trituration.

#### CEREBRAL ANÆMIA.

\* There is deficiency of blood in anæmia of the brain. There is vertigo, noises in the head, even syncope may be present.

**Causes.** It is caused by the same thing that causes anæmia in other parts of the body. Hæmorrhage, tedious labor, cancer, piles &c.

**Symptoms.** Drowsiness and loss of energy are its principal symptoms. A little work tires him much, even loss of consciousness may be present. Anemic murmur in the brain, power of thinking and mental labor are at a stand-still.

**Treatment.** It is best treated by medicine as well as by observing rules of hygiene strictly. Ventilated and sunny house, good nourishing food and change of climate are absolutely necessary.

Ammonium carb. is best here as in other parts of the body. Languid feeling, loss of appetite &c. are

its symptoms. We cured a young man who was very bad with this remedy.

*Ferrum met* and *Phosphorica* are the two essential remedies here as in other organs of the body. Extreme weakness, vertigo in getting up, fluttering of heart, face pale.

*Pulsatilla* is useful in young woman. Chilliness, vertigo, better in open air, stoppage of menses, diarrhoea.

*Arsenic*—Extreme prostration, anæmia from malarial fever and enlarged spleen, after abuse of quinine. Slight puffiness of hands and feet.

*Calcarea Phos.*—It is eminently useful in loss of the power of assimilation. In hydrocephalus it is useful.

Other remedies are *Phosph*, *Nux v*, *Ignatia*, *Zincum*, *Silica*, *Natrum mur* and *Sulphur*.

#### ENCEPHALITIS.

With this disease, meningitis is more or less associated.

**Causes.** Excess in drinking and sexual acts, excessive mental labor. Injuries in the head and ear disease and other eruptive diseases are reckoned as the causes of encephalitis.

**Symptoms.** Vertigo, headache and buzzing in ears and dim vision. Pain in various parts of body especially the head and neck. Convulsion often occurs. Mental derangement, laughing and crying alternately, even denentia. It ends in abscess of the brain and death follows.

**Treatment.** Belladonna in the first stage of the disease. Acute inflammation of middle and internal ears

Mercur Iod. Syphilitic cases and rheumatism ; otorrhœa, tonsils enlarged, nocturnal aggravation.

Kali Iod—If Merc Iod fails, it is beneficial. Chronic cases.

Bryonia —It is used when effusion takes place. Jahr says, headache, pains in body, chewing movements.

Pulsat and Veratrum viridi are often indicated. When abscess is suspected, Silicea helps. Lachnanthes in stiff neck. If from injuries, Arnica is the best and Dr. Baehr recommends it. We have also seen Arnica high very useful even after effusion.

#### TUBERCULAR MENINGITIS.

Meningitis caused by tubercular infection. Base of the brain is more frequently affected, so it is also called basilar meningitis,

**Cause.** Children are more prone to this disease. It is a secondary effect of tuberculosis in other parts of the body. Tubercles are formed in meningitis of the brain.

**Symptoms.** Headache and restlessness are the first symptoms seen to appear, followed by loss of appetite and vomiting. The child becomes feverish and pale ; at last delirium and other brain symptoms appear which end in coma. Twisting of muscles, even convulsion appears if the disease goes on unchecked. Temperature does not go very high, from

100 to 103 F. Respiration is more or less rapid. Hydrocephalic cry is very usual.

**Treatment.** Health of the child must be carefully looked after. Well ventilated rooms. Nourishing food. Careful homeopathic treatment often enables to cure cases.

In the beginning Belladonna and Apis are often indicated. Belladon with hyperæmic condition of the brain and Apis when œdema and effusion take place. The brain cry is the especial indication for Apis.

Calcareo is often indicated. Both carbonica and Phosphorica are used. Rickety children, scrofulous, subject to cold and catarrh and dyspeptic derangements. Tuberculinum is a very useful remedy in this disease. We have cured some cases with this remedy.

Tubercular infection in other parts of the body and head symptoms are promptly relieved by it. In scrofulous cases, with meningeal involvement and in the brain symptoms from otorrhea, we make use of it with success.

Kafka recommends Kali Iod in lower potency in this disease. We have seen Dr. B. L. Bhaduri of our city cure a desperate case in a child with this remedy.

Many recommend Glonoine and Atropin in this disease, but constitutional remedies must lead.

Medicine must not be changed too often or repeated with haste. One medicine selected according to symptoms must be continued. Apis especially is a medicine that requires time for its effect.

## Correspondence.

To

THE EDITOR, I. H. R.

DEAR SIR,

I should be obliged if you can find space for the following in the "Homeopathic Review" :—

A couple of technical cases on *Silicea*.

I have tried *Silicea* in expelling foreign bodies as recommended by Cowperthwaite, Clarke and others and record herein two cases in which the drug was used.

### CASE NO. 1.

A boy aged 4 years was operated upon for an abscess in the groin. In dressing a twisted cotton plug was used. Somehow or other on removing the dressing one day, it was found that the plug went deep into the wound and became invisible. The allopathic attendant suggested the only alternative of using a lancet to find the plug out; but I intervened and asked him to wait for at least 24 hours and see what internal medication, in such cases, was capable of doing. The same evening I gave a dose of *Silicea* 30 and to the surprise of every one present the plug was next morning found to be sticking to the roof of the dressing when removed.

### CASE NO. 2.

Quite recently a gentleman while lying in bed took one or two cardamon with peels on. Unfortunately a piece or two of the peel stuck into the throat

somewhere and produced a very unpleasant tickling sensation. The throat of the gentleman was douched continually for two hours by an allopathic physician and at last he found himself unable to extricate the foreign body sticking into the throat. The gentleman, at last, next day came to seek my help. I gave him a dose of *Silicea* 30 in the evening and when he got up in the morning, he found that the foreign body was gone and the throat was quite clear and healthy.

**Belladonna on bubonic plague and night-blindness.**

Night-blindness is quite peculiar to these parts and it generally happens in the months of September and October when the labourers have to work in the fields in the strong sun. I have succeeded in curing a number of cases with *Bell.* 30 and 200. Recent cases invariably yielded to *Bell.* 30 while more chronic ones required the drug in the 200th potency, but the cures were almost cent per cent.

During the two epidemics of plague in the town, I found *Belladonna* very useful. Generally in cases of bubonic plague my first trial commenced with *Bell.*, when the fever ran high followed by delirium and glands. In such cases *Bell.* alone succeeded in removing the abnormal conditions. I generally use *Bellad.* 30.'

Yours faithfully,

S. S. PANDEA,

For *Rai Saheb* SRINIWAS PANDEA.

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# হানিম্যা

হোমিওপ্যাথিক বাঙ্গালা মাসিক পত্র ।

১২৯১, বহুবাজার ষ্ট্রিট, কলিকাতা ।

বার্ষিক মূল্য—সডাক ২৫০ মাত্র অগ্রিম দেয় ।

সম্পাদক—ডাঃ আর, আর, ঘোষ, এম, বি, ( রিটার্ডার্ড এসিষ্ট্যান্ট সার্জেন ) ।

কলিকাতার খ্যাতনামা হোমিওপ্যাথিক চিকিৎসকগণ কর্তৃক পরিচালিত ।

হ্যানিমানের অর্গগন ও কেণ্টের হোমি-ফিলজফির সরল বঙ্গাভূবাদ, ঔষজ্যবিজ্ঞান, চিকিৎসিত রোগীর পুষ্টিপুষ্টি বিবরণ ও প্রমোক্তর সাহায্যে মফস্বলের চিকিৎসক, গৃহস্থ ও শিক্ষার্থীগণের সন্দেশ ভঞ্জন করিয়া সহজ ভাবে হোমিওপ্যাথি শিক্ষা দেওয়া হয় । এক্ষণ মাসিক পত্র এই নূতন এবং সর্বত্র সমাদৃত । আজই গ্রাহকশ্রেণীভুক্ত হউন ।

বি, সি, ধর এণ্ড ব্রাদার্স ।

বিশুদ্ধ আমেরিকান হোমিওপ্যাথিক ঔষধালয় ।

৮১নং ক্লাইভ ষ্ট্রিট,—কলিকাতা ।

টিউব শিশিতে ড্রাম /১০ ও /১৫ পয়সা ।

আমরা আমেরিকার বিখ্যাত “বরিক এণ্ড টেফেলের” নিকট হইতে বিশুদ্ধ হোমিওপ্যাথিক ঔষধ, শিশি, কর্ক, প্রোবিউলস, স্কগার অব মিক ও পুস্তক ইত্যাদি প্রচুর পরিমাণে আমদানি করিয়া বাজার অপেক্ষা সুলভ মূল্যে বিক্রয় করিতেছি । ইহা ব্যতীত বাঙ্গালা পুস্তক, কাগজের কেশ, কাঠের কেশ, ষ্টারমোমিটার, পিচকারী ও চিকিৎসা সম্বন্ধীয় যাবতীয় দ্রব্যাদি অধিক পরিমাণে ঈর্ষ্য মজুত রাখিয়া সম্ভাব্যে বিক্রয় করিতেছি ।

মফস্বলের অর্ডার বিশেষ যত্নের সহিত অতি সত্বর পাঠাইয়া থাকি ।  
কলেরা ও গৃহ-চিকিৎসার ঔষধপূর্ণ বাক্স—ফোঁটা ফেলা যন্ত্র ও পুস্তকসহ যথাক্রমে ১২, ২৪, ৩০, ৪৮, ৬০, ও ১০৪ শিশির মূল্য যথাক্রমে ২।০, ৩।০, ৪.৮, ৬.০, ৭।০ ও ১২।০ টাকা, মাণ্ডলাদি স্বতন্ত্র । বিজ্ঞাপনের আভ্যন্তর দেখাইতে অনিচ্ছুক, একবার পরীক্ষা প্রার্থনীয় ।

এলোপ্যাথিক ষ্টোর, ১৪১২ বনফিল্ডস লেন, কলিকাতা ।

[ নূতন হোমিওপ্যাথিক পুস্তক ! ]

ডাক্তার শ্রীজিতেন্দ্রনাথ মজুমদার, এম্‌ ডি, এল এম এক বি, কৃত

হোমিওপেথিক

# চিকিৎসা-সার ।

মূল্য ২।০ টাকা, ডাকমাণ্ডল স্বতন্ত্র ।

গৃহস্থ এবং চিকিৎসকমাত্রেই এই পুস্তক রাখা উচিত । ইহাতে নূতন ঔষধ সকল সম্মিলিত হইয়াছে এবং ঔষধ সকলের প্রভেদও অতি সরলভাবে ও সংক্ষেপে বর্ণিত হইয়াছে । অধিক কি, এই পুস্তকের সাহায্যে প্রায় সকল রোগেরই চিকিৎসা অতি সহজেই করা যায় ।

কলেরা বা

## ওলাউঠা-চিকিৎসা ।

এই পুস্তকে ওলাউঠার ইতিহাস, রোগতত্ত্ব, চিকিৎসা, পথ্যাদির নিয়ম প্রভৃতি সকল বিষয়ই বিস্তৃত ভাবে ও সরল ভাষায় লিখিত হইয়াছে ; এবং ডাক্তার বিহারিলাল ভাট্টা, প্রতাপচন্দ্র মজুমদার ও জিতেন্দ্রনাথ মজুমদার মহাশয়দিগের অভিজ্ঞতাও সম্মিলিত হইয়াছে । কয়েকটি রোগীর চিকিৎসা-বিবরণ দিয়া ঔষধ সকলের ব্যবহার বুঝবার পক্ষে বিশেষ সুবিধাও করিয়া দেওয়া হইয়াছে ।

মূল্য ২।০ টাকা, ডাকমাণ্ডল স্বতন্ত্র ।

পুস্তক দুইখানি কলিকাতা; ২০৩১ নং কর্ণওয়ালিস স্ট্রীটে প্রাপ্য ।

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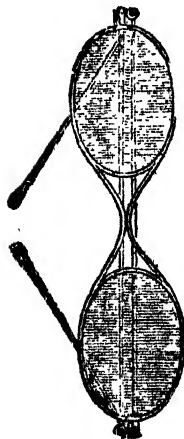
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**A Monthly Journal of Homeopathy and Collateral Sciences**

EDITED BY

**P. C. MAJUMDAR, M. D., & J. N. MAJUMDAR, M. D.**

*The Objects of this Journal are :—*

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2. The development of Homeopathic Practice of Medicine and Materia Medica, especially the proving and clinical application of indigenous drugs of the country.
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—HAHNEMANN.

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XXVIII. ]

MAY, 1919.

[ No. 5.

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## ERYSIPELAS.

Recently I had a few cases of this disease where the efficacy of homeopathic medication was remarkable. A few months ago I lost a very old friend who was a railwayman and who succumbed to this malady in spite of all the vaunted scientific treatment of the dominant school. Not long after this, a Mohamedan gentleman came under my treatment suffering from a violent attack of this disease. The toxemia in this case was marked from the very beginning, and from the focus of inflammation on the upper lip it gradually worked downwards very quickly affecting the whole face and neck within forty-eight hours. The temperature became very high, deglutition became difficult and respiratory troubles also began to appear. Moreover, the man was already very much debilitated having been subject to malaria. There was marked dysuria. The œdematous



condition of the face, neck and chest and the shining appearance of the parts together with the scanty and frequent urination suggested Apis to me at once. I gave it in the 6th potency, every three hours.

I saw the patient again the next day. The fever was less but the swelling and inflammation did not seem to be very much reduced. But one thing was marked, the disease had not progressed very much more. I gave a dose of the 200th. The next day the improvement was remarkable. And from that day on the patient began improving steadily and made a complete recovery within a week. He needed a dose of Sulph 200 and a few doses of Rhus. 30 to complete the cure.

My next case was that of a baby 12 months old. This was indeed a very serious case. The boy had just been recovering from an attack of pneumonia following influenza, when suddenly erysipelas appeared affecting the whole head and face. The child had been under the treatment of a friend of mine, who had treated him during the attack of influenza. When I saw the child, he was in a very bad condition. The temperature was 105°. He was very drowsy and the face was flushed. The head was very much swollen and blebs had appeared all over it. In some places the skin was peeling off leaving raw eroded surfaces. The bowels were irregular and the urine was scanty. He had Belladonna and Rhus. before. I began with Gelsemium 12x. This case made a protracted recovery and developed meningitis and endocarditis in its wake. Although his life was despaired of and

he lay between life and death for nearly two weeks, he ultimately made a complete recovery.

I had to give him Opium, Argent. nit, Bryonia, Kali carb, Lachesis, Acid Muriatic and Arsenic in the course of treatment.

J. N. M.

## DISEASES OF THE BRAIN.

### SUNSTROKE OR INSOLATIO.

This disease is caused by the direct action of the sun's rays on the brain and nervous system generally. It is of two kinds—(1) from the direct rays of the sun which is called sunstroke and (2) extreme depression of the nervous elements by excessive heat. The former is more fatal than the latter.

**Causes.** Heat of the sun is the direct cause of the disease. But anything that lowers the general condition of the system increases the tendency or susceptibility to heat. As for example dissipation, excessive mental worry and anxiety, drinking to excess, sexual excess &c. Heat of the sun and not much breeze tends to favor the attack.

**Symptoms.** When a man exposes himself to the sun for a time he may fall down insensible, his face is flushed, veins are enlarged, and he has throbbing headache and ultimately, loss of consciousness. Temperature goes very high—105, 106 and in one case I have noticed it 110 F. In favorable cases flushings, headache, &c. subside, and breathing which

was very hurried before assumes normal condition. Ultimately consciousness returns.

Cases of heat exhaustion are not so sudden, From slight somnolency to profound coma is the result. Pulse rapid and weak. If respiration is bad, there is likelihood of the patient's death sooner.

**Treatment.** In sunstroke the clothes of the patient should be loosened and cold application applied to the head and surface of the body. When temperature goes down, all cold applications should be stopped.

Glonoïn is the best remedy for sunstroke. Great headache and vertigo, loss of consciousness, high temperature and red face, hurried breathing, twitching of the muscles, extreme prostration and drowsiness.

Belladonna is next to Glonoïn. Symptoms are almost the same. High fever, flushed face, great headache, red eyes, exposure to the sun &c. /

Opium is indicated in drowsiness even to coma. Power of deglutition is gone and sterterous breathing. This may be inhaled in cases of inability to swallow.

Camphor—Loss of strength, difficult breathing, palpitation, hands and feet cold.

Gelsemium is very good for the premonitory symptoms. Vertigo, nausea, loss of appetite, exhaustion from heat, loss of sight.

Stramonium is also recommended by many.

'Lower potencies and frequent repetition' is the rule. No food during the attack. Milk, barley and nourishing food gradually.

## CEREBRAL APOPLEXY.

Rupture of any blood vessel in the brain followed by sudden loss of sensation, motion or consciousness. It is due to accumulation of blood in the brain.

**Causes.** Old age in which there is arterio-sclerosis is the principal cause. Men are oftener affected than women. \*Indigestion, drinking spirits and mental excitement, excessive straining at stools, gout and syphilis are the predisposing causes. Short, stout, thick neck, and plethoric persons are more subject to apoplexy. Traumatism is the direct cause in many cases. A fall or blow on the head often causes cerebral hæmorrhage.

**Symptoms.** Some premonitory symptoms are observed. Persistent headache especially on the occipital region, some vertigo and nausea. Pulse generally full and strong. Symptoms may be slight, a little loss of consciousness and speech or complete coma, paralysis and convulsion. The attack may be overwhelming—the patient falls down with loss of consciousness, and stertorous breathing which ends in Cheyne-stokes respiration. Such a patient dies in a few hours. Temperature is normal in the beginning, but rises up to 104 or more. I have seen a case where temperature reached 108 before death,

In other cases, consciousness returns, but there is aphasia and paralysis. The paralysis is usually of one half of the body, either the left or right side being affected. It may disappear in time or it becomes permanent. Such patients become emotional or hysterical.

**Treatment.** When preliminary symptoms appear, care should be taken in eating and drinking. Indigestible food, drinking wine and spirits, mental and bodily labor, anxiety and worry should be carefully avoided. We knew a man of middle age, of literary habits, who died in a few hours at his table while writing articles for a newspaper.

Two remedies are useful in the preliminary stage—one is *Nux vom*, another is *Phosphorus*. Indigestion, constipation, acidity and sedentary habits. *Nux vom* is the best. For excessive mental labor &c. *Phosphorus* is to be selected.

For serious and sudden attacks *Belladonna* and *Opium* are the best. *Belladonna* for flushed face, throbbing blood vessels and drowsiness, and *Opium* for comatose conditions, stertorous breathing and impending paralysis of the brain. When inflammatory symptoms are developing, hard bounding pulse, restlessness &c., *Aconite* should at once be prescribed instead of *Belladonna*.

*Hydrocyanic acid* and *Laurocerasus* are two valuable remedies for difficult breathing, pulselessness, coldness of body, tympanitis and impending death.

If paralysis remains, following remedies are useful. *Causticum* is the best remedy for paralysis in general. Hands and feet are paralysed with contractions.

*Zincum* may be given in mental derangement.

*Plumbum* is also valuable. Higher potencies are best.

*Argent nit*, *Graphites*, *Rhus tox* and *Anacardium* may be used.

Arnica is the best remedy for traumatic paralysis.

It has the power of absorbing accumulated blood in the brain.

In severe cases medicines should be repeated frequently. When swallowing is impossible, inhalation of the indicated remedies may be resorted to.

## THE INFLUENZA EPIDEMIC OF 1918.

(Special for Indian Homeopathic Review).

The first Influenza Epidemic of 1918 was just like the breakbone fever and claimed very few victims. The recovery generally took place in three or four days. The medicines required were Eupatorium Perfo., Gels, Bell., Bry, &c.

The second Epidemic is different. Early in October every day when going to see patients between 8 and 9 A. M., very many dead bodies were seen carried away to the cremation ground. This attracted my notice. Soon the number of deaths swelled and there was a stir, nay, consternation among the people. Not a single family was free and almost in no family was there a solitary case. Often the whole family was bed-ridden and there was no one to look after the patients. A doctor entering a family did not come out even in an hour ; for perhaps he had seen a dozen patients one after another in the same family. Cases were not of a uniform type ; yet big jars were filled with ready made mixtures in all big dispensaries. A heavy mortality. was the result.

The cases may be classed as under :

(i) Where throat symptoms were prominent [Ipecac, Kali brichrom, Phos., Antim tart, Causticum].

(ii) Where the lung troubles were predominant [Iodine, Phos., Antim tart, Sulphur, Kali Iodide.]

(iii) Where the heart and the nervous system were mostly affected.

[Phos., Kali carb, Kali Iodide, Spongia, Antim tart.]

(iv) When the brain was the centre of affection.

[Phos. Rhus tox, Lachesis, Arsenic, Hyoscyamus.]

(v) Malaria like cases with lung and throat complications [Nux, Natrum mur, Sulphur.]

It may not be out of place to state that cholera was prevalent in those days. I was called to attend two cases of cholera in the stage of collapse. I was told in both these cases that the disease originated in influeza and subsequently changed to cholera. The second influenza epidemic was rather an epidemic of pneumonia or pneumo-typhoid or in plain words it was pneumonic plague. Where the plague did not attack the lungs, cholera developed. The outbreak of cholera just after the influenza is probably a different aspect of one and the same disease. Plain routine treatment had been a failure. Hence the success in Homeopathic and other similar kinds of treatment where individual cases were attended to. The remedies in order of importance are ;—Bry., Sulphur,

Antim tart., Phos., Kali iodide, Kali carb, Rhustox, Arsenic, Iodine, Hyoscyamus and Causticum. No words can express the services rendered by these medicines when life was attacked in its most vital part. A few indications are given below :—

Bry 6. Early stage of the disease—thirst for large quantities of water or absolutely no thirst, lying still, stitching pain in breathing, constipation ; generally useful in Pleuro-pneumonia.

Sulphur 30. When the fever has come down to 100° F. or below, one dose of Sulphur 30 will check the progress of the disease. So also when remission has once taken place or when the fever remains at its lowest, one dose per day is sufficient. It shows its power of absorption when after the storm is past, fitful flashes of fever remains, and when there is wheezing noise in the lungs ( not the rattling of Antim tart ). It cannot absorb much mucus, when Kali iodide, Antim tart, Kali sulph and Lycopodium should be chosen according to indications of course. The place of Sulphur is where a chronic state exists and neither absorption nor free expectoration has taken place, or where there is a desire to revive the reactive power of the patient.

Antim tart 6 or 30. Rattling in throat or chest, when the heart is weakened. Pulse is soft and small. Fever is not high. A little perspiration on the upper part of the body. When the patient is in a desperate state and is probably to die within a day or two, Antim tart 30 or 200 in very frequent doses can be



relied upon. The nearer the death is, the higher is the potency and the oftener is the repetition necessary. Again, when there is the blowing noise in the lungs showing inelasticity and impending paralysis of the lungs, Antim tart 30 is the only medicine that can be relied upon. When the pulse is soft and small, there is perspiration on the forehead, slight fever—99 to 101, loose and rattling cough, breathing difficulty and coughing and expectoration too little to clear the lungs of mucus, Antim tart has no equal.

Phos. 30. Where the heart or nervous system has been affected, excitement and pain in the left chest prevail or where the patient is passing into Pneumotiphoid state. Phos. can do much. Fine wheezing noise in the throat or chest, blood or streaks of blood in the sputa, diarrhoea or diarrhoea containing sago-like particles.

Kali iodide 3 or 6. The special characteristics of all Kalis are that the aggravation takes place between 2 and 4 A. M. Where the expectoration is profuse and the chest is filled with rattling mucus, and Antim tart has failed to relieve or reduce the quantity of mucus in the chest, Kali iodide is able to accomplish much. After this, Sulphur will complete the cure. In Kali iodide the symptom is thick, green and salty mucus.

Kali carb 6 or 200. Kali carb has aggravation at 3 or 4 A. M. But Kali carb has small feeble pulse, stitching pain, wheezing, generally dry cough and the patient has progressed towards death more than in the case of Kali iodide, Kali carb has got wheezing,

Kali iodide has rattling. Kali carb has constipation and wind in the stomach, Kali iodide diarrhœa.

Iodine 3 or 6. It is the favorite remedy of Dr. Kaska. Some pain in chest, extreme soreness, breathing difficulty, sensation as if lungs have become stiff, high fever and constipation. During the first and second stage, it can do wonders. It agrees with Bryonia, but the Iodine case is more severe than Bryonia in fever, cough, soreness and breathing difficulty. The first beneficial action becomes evident in passing stool, relief in soreness and reduction of temperature.

Causticum 3 or 200. When the urine is very high coloured and small in quantity, throat inflamed, pain in deglutition, drinking giving relief to throat or to cough, where the patient cannot lie down for cough or breathing difficulty.

Rhustox 6 or 30. Delirium, restlessness, Diarrhœa, where Phosphorus has failed to check the delirium, aggravation at night.

Arsenic 30. When Rhus tox has failed to check restlessness or diarrhœa or delirium and the patient is gradually growing worse, aggravation between 1 and 2 A. M.

Hyoscyamus 30. When Phos, and Rhus could not check the delirium and the patient is gradually passing into unconscious state with low muttering delirium, twitching of the muscles, subsultus tendinum, catching at imaginary objects.

I have not mentioned all the remedies. They can be found in any Therapeutics. The reader may refer

to Nash's Leaders on Respiratory Organs and Rankin's Disease of the Chest for further study on the object.

In conclusion, I cannot too highly recommend the famous onion poultice which I applied on the chest when the patient's life was in danger. This may be applied on the other side viz. back, if necessary. Take ten or twelve onions, and a very little quantity of mustard or rye-meal ; ground them together. Mix vinegar enough to make a thick paste. Put it over fire and let the mixture simmer for ten or fifteen minutes. Take half on cloth as large as the chest and put it on the chest as hot as the patient can bear. In about 8 minutes apply the other half and repeat from 6 to 16 times a day according to severity. While poultice is stopped, rub the chest dry and apply cotton on the chest and back like a body jacket.

J. C. GHOSAL, B. A.,

L. M. E. II.

Homeopath, Meerut City.

## LYCOPodium.

*Lycopodium Clavatum (Club-Moss) Trituration of Spores or Ethereal Tincture of Spores.*

The spores of Lycopodium when collected form a light dry powder, which is used as a coating to pills and a dusting powder for excoriated surfaces, and is generally held to be quite inert. A century or so ago it had a regular place in medicine, being prized

for certain conditions which suggest that an unconscious Homeopathy had found its way into the uses of it. Hahnemann found it in use and by his method of trituration quickly made it one of the most valuable of all remedies. Within the outer coating of the spore is an oily layer wherein seem to reside most of the medicinal virtues of the drug and trituration by rupturing the spore sets this free. Ether will extract the oil and an ethereal tincture is therefore another method of pharmacy : but there are also mineral salts in the spores which are included in the trituration, and it is probable that they count for something in the pathogenesis. Particularly prominent are the elements Silica and Aluminum and resemblances to the symptoms of the first named are significant in the provings. The use therefore of trituration seems desirable for lower potencies and tinctures (colloidal solutions) or triturations for the higher ones.

Lycopodium is very highly valued in chronic diseases, being chosen very largely on general constitutional symptoms, but it has also a very marked relation to the alimentary canal and the liver, and is frequently indicated in disorders of this tract by the local symptoms. It will be well, however, to master first the general characteristics and peculiar symptoms. They are so definite that Lycopodium is one of the drugs most readily selected on a homeopathic basis.

It is particularly well adapted to patients in whom the mental powers have, as it were, outrun the physi-

cal, where the intellectual faculties and interests count for much, but the bodily strength is deficient, the muscles weak and the fundamental processes (digestion, excretion &c.) apt to be faulty. This relation of drug to patient is true at any age: precocious, weakly children respond to it wonderfully. Dr. Kent instances Paul Dombey as a *Lycopodium* subject, and that is a convenient instance to fix the type in the mind. Older people become mistrustful of themselves and of others,\* hypochondriacal, complaining (often with reason) of failing memory and slowness of mental reaction, and this generally when they have been accustomed to consider their brain power above the average. The physical strength is nearly always below the average also, but usually the complaint is of failure of mental powers, for the typical candidate for *Lycopodium* has probably never rejoiced much in bodily activity or cared for athletics. He is a brooding, sedentary person, mentally absorbed, physically indifferent. *Lycopodium* has been called the "miser's" remedy: the hint is valuable if interpreted to mean (as it does) that the saving and meanness come out of a real gnawing anxiety for the future and undue sense of responsibility. It is not so much love of money as such, but anxiety as to the possible lack of all that money means for the individual and his dependents, that make up the "miserliness" that calls for *Lycopodium*. This sense of responsibility developed into a positive burden to life is characteristically shown also in a constant fear of breaking down under stress (e. g.

the barrister bears he will lose the thread of argument in court), a fear which is constantly falsified, but nevertheless persists. This symptom is very marked under Silica and possibly the Silica in Lycopodium shows its effect in this characteristic.

A good deal of depression and of irritability is likely to accompany a condition calling for Lycopodium. Under nourished states, especially those due to chronic dyspepsia or threatening tubercle or congenital syphilis will often suggest its use. The skin is dry and reacts poorly, the hair falls readily : vasomotor disturbances (flushings and sensations of sinking and emptiness) are common especially at the characteristic time of aggravation of Lycopodium, to be presently noted, and with them a consciousness of pulsation of arteries that has led to some special uses of the drug.

Among the general symptoms there are some very characteristic and easily recognized. Thus symptoms are worse from 4 p. m. to 8 p. m. (occasionally the aggravation endures longer, commencing at about 5 p. m.) : if the disease is characterized by paroxysms (e. g. asthma, neuralgia, &c.), the worst attacks will fall into this part of the twenty-four hours. Times of aggravation point generally to an alteration of the normal rhythm of life. In health there is a curve of the general vital activities which has a relatively constant maximum and minimum : in disease this curve is apt to be altered (the inverse type of temperature in tuberculosis is familiar) and alterations of rhythm, if

shown by fairly constant times of aggravation and amelioration, have great value as general symptoms. The *Lycopodium* symptom is rather an intensification of the normal rhythm than an alteration of it, but is very characteristic. *Hellebore* is the only drug that shows the symptom in so marked a degree (for the twilight aggravation of *Pulsatilla* and *Phosphorus* seems rather a reaction of the mind), and whenever it is clearly marked it should always bring thought of *Lycopodium* to the mind of the prescriber, as *Lycopodium* is a drug of much greater range of action than *Hellebore*. Typically (though variations occur frequently), the aggravation begins at 4 p. m., continues till 6 p. m., then tends to lessen till 8 p. m. After this it may disappear or begin again after a period of amelioration.

The symptoms of pain, &c, that indicate *Lycopodium* characteristically begin on the right side and then travel to the left. Drugs that notably influence the liver, as *Lycopodium* does, have always a certain "right-sidedness" in the incidence of their symptom, a predominance of right-sided aches and pains and inflammations. It is difficult to explain the phenomenon: but it certainly comes out clearly in drug provings and equally is often prominent in disease, and the homeopathist finds it when well-marked (and no symptom is of much value unless well marked), a good indication of his choice of remedy. With *Lycopodium* it might show as a tonsillitis beginning in the right tonsil and then attacking the left, or it may be a

headache or pain in the ovarian region, but if the symptom takes the direction right to left, that is so far an indication for Lycopodium. Lycopodium is a complementary drug to Lachesis, often completing a cure which Lachesis has begun, and with Lachesis the direction of symptoms is the exact opposite, being left to right, and Lachesis symptoms are as predominantly left-sided as Lycopodium symptoms are right-sided.

Relief to pain and discomfort from uncovering is a Lycopodium symptom. Thus in headache to remove the hat relieves, in abdominal pain the clothing is loosened. It is not only a desire for cool air to the head (although the candidate for the drug prefers the open air, is better out of doors and worse in a stuffy atmosphere), but also a dislike of pressure that is thus exemplified. It is interesting to note in view of the presence of Silica in Lycopodium, and the hint above mentioned that Silica makes its presence felt in some symptoms, that the headache of Silica is relieved by wrapping up the head warmly, the exact reverse of the condition sought for when Lycopodium is the indicated remedy.

Although open air and general coolness are preferred, any abdominal pains and discomfort are aggravated by cold food and drink and relieved by swallowing warm things. Phosphorus patients are chilly in type but their gastric symptoms lead them to desire cold food ; Lycopodium patients are of a warm blooded type, but suffer from cold food. It should be added that with Lycopodium patients the aggravation



from cold food and relief from warm extend also to headache or sore throat. Two curious *Lycopodium* symptoms may be noted here ; the first is the frequency of to and fro movements of the alæ nasi in patients requiring it. These are not (as has mistakenly been maintained) the movements of dyspnœa ; they are not synchronous with respiration, but are of the nature of twitchings, occurring with some rapidity. Spasm is not infrequent when *Lycopodium* is required, spasm for instance of the tongue and of the facial muscles, movements of the head, constriction of the throat (Globus). The other curious symptom is that the right foot may be hot and the left foot cold. Much derision has been poured on this statement, and it has been attributed to thrombosis of one side and so explained away ; but it is a subjective symptom which unquestionably occurs every now and then in chronic disease, quite independent of any blocking of circulation. Its explanation is impossible at this stage of knowledge, but without a doubt it depends on some definite pathology, and there is ample evidence that on the (not very frequent) occasions when it is complained of it is an excellent indication for *Lycopodium*.

Other general symptoms are restlessness leading to desire to move about which generally removes pain, as with *Rhus tox* : dryness of the skin, especially of palms of the hands, dryness of mucous membranes, falling of the hair. The fear and apprehensiveness noted among the mental characteristics are apt to

have a profound effect on symptoms affecting the body (e. g., gastric and liver symptoms) making the drug suitable for obviously hypochondriacal persons ; crossness and irritability are frequent concomitants of these groups of symptoms, and form in themselves additional indications for Lycopodium.

Apart from general characteristics Lycopodium has a very definite relation to diseases of the alimentary tract. When it is needed there will generally be several present of the general symptoms already noted (such as the time of aggravation) but in addition there are characteristic local symptoms which indicate a catarrh, chiefly of stomach and duodenum with extension to the bile ducts. The tongue is usually coated and characteristically dry, saliva being tough and scanty ; there may be cramps or spasms of tongue muscles (the movements of the *alæ nasi* have been already described) ; the throat is sore and dry ; ulceration or tonsillitis (diphtheria will react well to Lycopodium if the general symptoms of it are well-marked), will be on the right side with a tendency to spread to the left. The appetite is capricious, being sometimes lost and sometimes excessive : characteristic is hunger with sudden satiety after a mouthful or two. A sour taste in the mouth, nausea with sour risings, a general tendency to acidity is noted. Craving for sweet things is common and aversion from oysters. Patients who are labeled "gouty" are often candidates for Lycopodium. Without doubt there are several disorders of incomplete metabolism confounded often.

under one heading of gout, and each with its own particular excess of this or that waste product. There is a metabolic disorder of the vegetarian, as well as of the meat eater, and other cases may incline predominantly to one type or the other. *Lycopodium* seems generally more suitable to patients who eat little (or may even dislike) meat : they are liable to pass an excess of oxalates in the urine, though the characteristic excretion of *Lycopodium* contains also urates in quantity, precipitated as a "red sand." Nausea, vomiting, waterbrash and gastric pain, heat locally, all testify to the involvement of the stomach. Flatulence is a very marked symptom of the remedy, but affects the bowels more than the stomach and is passed more by the anus. The result of the fermentation and distension is a sense of acute discomfort felt especially in the right hypochondrium and leading to a characteristic desire to loosen the clothing or be intolerant of any pressure. The liver may be felt enlarged and the patient may be jaundiced : the drug seems to have power to cause catarrh of the bile ducts and as this is a precedent condition to gallstone formation, *Lycopodium* may be useful in that disease, in the intervals between attacks. Cramping pains point to irregular peristalsis and rumbling and gurgling to the fermentative quality of the disturbed digestion. The patients are usually constipated. As with alumina and Silica (both of which are prominent among the mineral components of *Lycopodium*) the constipation arises from an inertia of the bowel, the motions are

only passed with considerable straining, hæmorrhoids are common, and there is often pain and bleeding from evacuation. The constipation of infants is often much helped by Lycopodium.

All these abdominal and alimentary canal symptoms are to be read as the signs of a general failure of the tract to function normally with consequent incomplete metabolism. Invariably with such cases, symptoms (conveniently though summarily labeled as "toxic") are apt to occur, such as headaches, neuralgias of this or that nerve, joint pains and chronic swelling, to say nothing of mental symptoms such as have been already described, which lead to a diagnosis of "neurasthenia" or "hypochondriasis." Sometimes these (really) subsidiary symptoms are more prominent than the alimentary canal symptoms and mask them, but whenever they are such as to call for Lycopodium they will have some of the characteristic features of the drug. The pains will be worse from 4 p. m. to 8 p. m., the headache will be relieved by open air and made worse by pressure (as of the hat), the sciatica will be worse from pressure (lying on the affected side) and so on. The symptom complex is to be read as a whole, but if the abdominal symptoms are clear and are recognized early, then Lycopodium will clear up the case, and these later evidences of uncured trouble will not appear.

(To be continued).

—The North American Journal of Homeopathy.

## Correspondence.

Baloon Bazar,  
Monghyr.

To

THE EDITORS, INDIAN HOMEOPATHIC REVIEW.

DEAR SIRS,

I beg to give below a picture of the furiousness of the Epidemic of Pneumonia in this town. The epidemic in the month of October last was such that sometimes a whole family was attacked with influenza and that in almost all cases I found the patients in delirium. Some had typhoid symptoms at the same time. The scene was very pitiable; as for instance in a house there were six members and all were suffering from influenza and no one of the family was well enough to be able to approach physicians and doctors and no one could give sago, barley or water to the poor patients. Ipecac, Kali carb, Gelsemium, Eup. Per. were found very efficacious in influenza.

I am very desirous to give the report of a few cases which were cured homeopathically so speedily that the neighbours of the patients and they themselves were astonished to see the effect.

I.

Wife of R. gave birth to a child and a few days before the delivery, she had an attack of influenza and I was called to her place. Her husband was inclined to let her have some medicine but she refused owing to pregnancy. It happened that she gave birth to a child the following day. The patient's husband had faith in me and he told me the history of her delivery. I asked him about her diet and told him not to let her have solid food." He, as a man of business, paid no heed to my remark and so solid food was given after the delivery. One morning her husband came

to me with great anxiety and said that his wife had several loose stools and got high fever and he took me to his house. Thinking it to be a septic case I gave Pyrogen 30 to be taken every 2 hours and in the evening words came to me that she was better. At about 9 p. m. the same day the patient called her husband and told him that she was feeling uneasiness in an aggravated form. He then and there sent for an allopath of the town who prescribed some medicine and by the morning she had become such that she was almost beyond human aid.

Violent delirium, algid condition of body, and collapse made their appearance and the lungs were inflamed. At last I was again called and I gave Belladonna 12 every half an hour, and a compress on the forehead made of Lavender, Venegar and Rose oil i. e. *Ragagool* to be put wet entirely over the cranium ; after 3 hours very little improvement was noticed and as the jirking of limbs was very great I added Zinc. met 12 to alternate hourly ; at 10 p. m. I saw her improved considerably. As both her lungs were congested, and as there was no expectoration but hurried breathing, I carefully looked after the symptoms and on examining the case I found typhoid symptoms were present as well ; she passed thin stools very frequently and there were distended abdomen and pain in the right hypochondria. I gave Phosphorus 200 1 dose and it arrested the looseness of bowels and by and by she was cured. I would further mention that this case of pneumonia was very serious and I applied some local treatment as well, and gave hot mustard and linseed poultices over the chest.

## II.

\*Another patient had an attack of pneumonia who from the very beginning of his illness placed himself under my treatment. I attempted much not to let him have an attack of pneumonia but was quite unsuccessful. The case developed

to such an extent that dysenteric stools were passed 40 times in a day. After having tried several medicines which proved quite ineffective, I gave Pyrogen 200, two doses, one to be given in the morning and the next in the evening, which arrested the disease instantaneously—number of stools was lessened to a great extent but he had some forgetfulness which was cured by giving a few doses of Belladonna 12.

### III.

Babu Rameshwar Prosad, a good cultivator of Jamandigri, had complained of painful sensation at the time of passing urine for the last few days, before he had an attack of renal colic on the 2nd of January, 1919, when I was called. The patient stops in a village Jamandigri by name, 6 miles off Monghyr town, where I arrived at 8 p. m. He was in an agony owing to the intensity of pain which was extending from bladder to the left kidney region.

The special symptom I found in the man was aggravation from motion. I gave Bry 200, 1 dose, and nothing else. He was quite well the next day.

Yours Truly  
S. N. SAHAI, M. B. (etc)

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XXVIII. ]

JUNE, 1919.

[ No. 6.

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## INFLUENZA.

We have yet to see the last of this dire epidemic. We have already dwelt at length on this subject, but there are some very peculiar features, which have struck us being quite out of the ordinary. The throat being the principal seat of the disease at its onset, it works its way downwards and affects the air passages. It is very peculiar that in some cases pneumonia develops within 24 hours, and in many cases the patient is carried away within 48 hours inspite of the best efforts of the physicians. The principal remedies have already been delt with, but still the homeopathic *Materia Medica* is vast and we can hardly say that we have considered all tho remedies. Where the heart seems to be affected and medicines like Arsenic, Carbo veg, and the like seem to have little or no effect, we should think of Calc. ars, Lobelia and Laurocerasus.



Then there is the other variety where the patient seems to linger long, and although the virulence of the attack does not seem to be so violent, still the recovery seems to be very slow and tardy and the vitality of the patient seems to be below par, or where the recuperative powers seem to be completely gone,—in such cases we should think of *Psorinum*, *Bacillinum*, *Sulphur* and the like remedies. These cases seem to run into tuberculosis most insidiously and we should be on our guard. In malarial subjects who are already debilitated by the previous disease, the prognosis is generally grave. Exposure to cold and variations of temperature should be carefully avoided. *Natrum mur.* will do well in some of these cases. If there is diarrhoea with it we should think of *Natr. sulph* and *China*. We quote below a few articles bearing on the subject.

J. N. M.

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### KEYNOTE INDICATIONS FOR DRUGS IN THE PREVAILING INFLUENZA.

W. H. Freeman, M. D., Brooklyn, N. Y.

The following is not a complete symptomatology of drug indications for the present epidemic, but rather a brief synopsis of keynote symptoms which, in the experience of the writer, were the principal basis for the accurate solution of individualistic curative specifics.

Homeopaths in other portions of the country with climatic and atmospheric conditions differing from

those on the Atlantic coast may observe indications more or less different from those mentioned.

*Bryonia* : Drowsy or lethargic ; wants to lie down and keep quiet ; worse from motion and better from rest. The pulse has been rapid, feeble and soft or dicrotic, *but more often* it has been *slow* with the fever (Gels.), and thirstlessness with the fever has been the rule rather than the opposite (Gels.). About seventy-five per cent. of my cases have been markedly benefited and quickly cured by *Bryonia* given on these indications, and many times after *Gelsemium* had been given unsuccessfully. Ninety per cent. of the pneumonia cases were relieved by *Bryonia*.

*Gelsemium* has been curative and markedly and quickly so in a very small percentage of the cases, though it has had a good tryout in many cases where seemingly well indicated, but without success. Slow pulse and thirstlessness with general aching and chills up and down the back, but without the desire to keep quiet ; aggravation from motion so characteristic of *Bryonia*.

*Belladonna* cases have appeared in small groups now and then. Bounding, rapid pulse, flushed face, throbbing headache, hot head and face with chilliness and coldness of the feet or hands and perhaps tonsilitis have been its leading indications.

*Nux vomica* cases have appeared in small groups also. Chilliness, pronounced sneezing, acrid, watery coryza, stopped nose and supraorbital pain ; all better while in the open air, but worse afterward, and worse

while lying down, with impatience and irritability, have been its keynotes.

*Rhus tox.* after getting wet or having been out in the rain or from cooling off after sweating. Backache and chilliness worse from lying in bed and better from motion, from warmth and from pressure.

*Arsenic* was needed only in a few late cases, which had been neglected or improperly treated, for weakness, prostration, restlessness and chilliness. Chiefly for neuralgic pains, worse while resting but not relieved by motion. No early cases calling for this remedy were seen.

*Aconite* was needed in only a very few cases in which, with symptoms somewhat similar to *Bryonia*, the patient was wide awake, restless and frightened. It cured quickly in the few cases in which it was given on these indications.

*Phosphorus* was curative in a very few cases for dry cough worse in the cold air and for pneumonia with constant dry cough; the left lung and the lower right lobe being affected.

*Causticum* was indicated in occasional groups which began with cough and *no fever*. Irritation low down in the chest, and could not seem to get under it. Hoarseness. *Causticum* quickly cured all such cases.

*Antimonium tart.* was used only three times, but the writer believes that it saved two lives at least. Bronchial rattling without expectoration, but with moist skin, cyanosis and lethargy or stupor.

*Bacillinum* used in seven or eight very bad cases

with recovery in all but one. Always think of it in bronchial or pneumonia cases that relapse without apparent reason or when well indicated drugs only help temporarily and the case gets worse in spite of careful prescribing. It seems to fit those cases that other remedies can't hold and contrarywise ; it is detrimental and harmful in all other cases.

#### CONVALESCENT REMEDIES.

*Psorinum* : Weakness and slow recovery without definite symptoms discoverable, upon which to base any other prescription or when the well indicated remedy fails, during convalescence.

• *Natrum mur.* : Weakness with desire to rest and worse from exertion, but better in the open air. Catarrh, cough and thirst. Often headache or back-ache.

*Kali carb.* : Sticking chest pains worse from deep breath or during ordinary respiration or at any time without apparent cause or modality and not affected by motion. Stiffness and tired feeling in muscles, especially of the nape of the neck or dorsal region. Cough or catarrh.

*Kali iod.* : Frontal sinusitis with atrocious supra-orbital pains, stopped nose, greenish catarrh. Usually better in the open air. Sometimes needed in acute coryza with supraorbital pain when Nux fails.

The indications for Pulsatilla, Kali bi., Sulphur, Sepia and a few others are so well known that it would seem superfluous to call attention to them.

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## PNEUMONIA.

*Aconite*.—Chill, followed by intense fever, hot, dry skin, quick and hard pulse ; accelerated, labored, incomplete respiration, with restlessness, palpitation, fear of death, dry cough, soreness and heat in chest ; later, burning-shooting or burning-pressing pains in chest, with painfulness to external pressure ; oppression, and acceleration of respiration, sense of weariness and exhaustion in chest ; hyperæmia of lungs, sputa thin, frothy, tinged with blood.

*Arnica*.—Caused by mechanical injury and where in plethoric persons pneumonic infiltration shows, a tendency to hæmorrhage ; dry cough, shaking the whole body, with tough, bloody sputa.

*Arsenic*.—Extreme prostration, clammy sweat, great thirst, drinking little and often ; shortness of breath on slight exertion ; dry and dark tongue and lips, diarrhœa ; singing and buzzing in ears ; tendency to colliquation and dissolution ; threatened gangrene, with ichorous expectoration, fetid or dingy green (Chin., Lach.). In sudden œdema, with passive hyperæmia of the lungs (sometimes caused by defects of the right side of the heart) ; in old people, from repercussed eruptions ; in asthmatic persons ; hypostatic pneumonia ; pneumonia notha in old people, with danger of paralysis of lungs ; hoarse after midnight, sudamina ; very restless ; worse after midnight.

*Bellad*.—Cerebral complication, with great nervousness, intense and constant delirium ; restlessness,

sleepiness, but cannot sleep ; picking at bedclothes ; flushed face ; congested eyes ; pneumonia arising from or accompanying acute bronchitis ; pneumonia of drunkards (*Nux v.*) and of old people ; pneumonia of a typhoid character from the beginning.

*Bromium*.—Hepaticization of lower lobes ; right lung mostly affected ; sensation of weakness and exhaustion in the chest ; sensation of constriction impedes respiration ; with dry, tickling cough ; loose cough night and day, but no expectoration.

*Bryonia*.—Lobular pneumonia, anxiety from oppressed inspiration, pressure on middle or lower part of sternum ; bruised feeling in chest ; shooting pains in chest ; red hepaticization and cough, but expectoration not yet free, sputa viscid, tenacious, of a brick dust color ; foul tongue, constipation ; gastric catarrh ; thirst for large quantities ; abdominal breathing ; inclination to lie perfectly still.

*Cactus gr.*—Oppression of respiration, pricking pains ; acute intense pains with the cough ; bloody sputa ; hard, quick vibrating pulse ; feeling of constriction in chest preventing free speech ; sharp wandering pains in chest, especially in scapular region ; cough, with thick yellow sputa like boiled starch.

*Carbo veg.*—Profuse cool perspiration, pulse small and rapid ; great prostration ; tongue dry, with little or no thirst ; foul, decaying diarrhœic stools ; breath foul, craves cold air ; foulness of all secretions ; rattling in chest ; distressing cough, without any expectoration, by spells, or fetid, gangrenous sputa. Paralysis

of lungs ; pneumonia complicated with affections of right heart, or, in emphysematous patients, with old bronchial catarrhs.

*Chelid.*—Shortness and difficulty of breathing, with tightness and anxiety of the chest, violent stitches in right lung going to the lower edge of right shoulder-blade ; short, dry cough, which increases the pain ; great and quite irregular palpitation of heart ; short and quick breathing, with anxiety, as if he must choke ; bilious pneumonia.

*China.*—Hectic symptoms, with marked prostration, from loss of blood ; pneumonia complicated with hyperæmia of liver, icterus, intestinal catarrh ; incipient gangrene ; hæmoptysis, with subsequent sup-puration of lungs and stitches in chest, worse during deep breathing and sudden movements.

*Cuprum.*—Lobular pneumonia, when formation of abscess threatens ; beginning paralysis of lungs, indicated by sudden difficulty of breathing, followed by great prostration ; complication with whooping-cough ; face earthy, dirty, bluish : roof of mouth red ; sweat sour-smelling ; diarrhœa.

*Gelsemium.*—Congestive pneumonia, with suffering under the scapulæ, both sides, caused by checked sweat ; short paroxysms of pain in superior part of right lung, on taking a deep breath ; rawness and soreness of chest ; slow, heavy breathing ; pulse slow, full ; thirstlessness.

*Hepar.*—Mild suppurative stage, extending only over small part of a lung, with lentescent fever ;

chronic pneumonia, with profuse purulent expectoration ; weakness of the chest, preventing talking.

*Hyos.*—Pneumonia, with cerebral symptoms (Bel.), delirium, sopor ; dry, fatiguing night cough, or rattling in chest ; pneumonia complicated with typhus ; hypostatic pneumonia in the course of other chronic affections ; pneumonia senilis, with acute œdema of lungs ; pneumonia of drunkards.

*Iodine.*—Pneumonia crouposa ; tendency to bronchial and pulmonary congestion and hæmorrhage ; sensation of weakness in chest, with anxiety and oppression, and burning, tearing, stabbing pains ; sensation, as if something resisted the 'expansion of the chest ; cough, with dyspnœa and blood-streaked expectoration. Also during third stage, where slow suppuration sets in without marked febrile symptoms in tuberculous patient, and causes a slowly progressing hectic condition, entirely confined to lungs.

*Ipecac.*—Infantile pneumonia ; respiration rapid, difficult, surface blue, face pale ; rattling of large bubbles, or fine rattling noises in chest, with spasmodic cough and nausea ; hyperæmia of brain, without sopor ; convulsions.

*Kali bich.*—Pneumonia crouposa, with expectoration of tough stringy mucus ; coughs up casts of elastic fibrinous nature ; loud mucous rales ; *pains from back to sternum*, or from mid-sternum darting to between the shoulders ; morning aggravation.

*Kali carb.*—Infantile pneumonia ; during whooping-cough ; great dyspnœa, preventing the child from



sleeping or drinking ; stitches in chest ; difficulty of raising the mucus, although constantly coughing ; wheezing and rattling breathing, choking cough ; inability to breathe deeply ; pneumonia, with stitches through right chest, hepatization of right lung, worse when lying on right side ; abscess of lung, with expectoration of pus and blood.

*Kali iod.*—Pneumonia in the beginning when the disease localizes itself ; also with so extensive hepatization as to cause cerebral congestion and serous exudation ; face red, pupils large, urine suppressed, one side as if paralyzed ; cough dry, hawking, later copious green sputa ; œdema pulmonum, with pneumonia.

*Kreos.*—Gangrene of lungs ; dry wheezing cough ; after every coughing spell copious, purulent expectoration ; difficult breathing, with anxiety ; sensation of oppression in chest, better from pressure.

*Lachesis.*—Pneumonia, with hepatization, mostly of left lung, and great dyspnœa on awaking ; especially useful in removing deposits resulting from inflammations in lungs already invaded by tubercles, or from low-graded chronic inflammations, developing during the progress of other diseases ; suffocation and shortness of breath from the cough ; frothy expectoration, mixed with blood ; purulent dissolution of exudation during third stage ; threatened gangrene of lungs, with fetid breath and sputa.

*Lachnan.*—*Typhoid pneumonia* ; hot and oppressed feeling in the lungs and heart, with dizziness ; cough

worse in bed, preventing sleep ; stitches following one another in quick succession, while at rest and when moving ; unnatural brightness of eyes, with red flushed face.

*Lyc.*—Typhoid or neglected pneumonia after suppressed menses, with continuing hepatization and purulent sputa ; adynamia and night-sweats as sequelæ of neglected pneumonia ; or, pneumonia, with raising of a mouthful of mucus at a time, of a light rust color, stringy, and easily separated ; constant tickling cough, worse at night ; numerous loud mucous rales, with rare and scanty sputa ; cough loose, full and deep, sounding as if the whole parenchyma of the lung were softened ; circumscribed redness of face ; *fan-like motion of nostrils*.

*Mercurius.*—Pneumonia and bronchitis, especially when the patients are disposed to blenorrhœa, or have a profuse expectoration of viscid bloody mucus ; bilious pneumonia, with great tenderness over the right hypochondrium ; *asthenic pneumonia*, with feeling of weight in lungs, short cough, and expectoration of bloody saliva ; epidemic broncho-pneumonia, with deep irritation of the nervous system ; nose, larynx and trachea become suddenly dry, dyspnœa sets in with spasmodic cough, worse at night, and yellow-green, blood-streaked expectoration ; skin burning hot, at times covered with copious sweat ; tongue yellow, soon becomes dry ; senses dull, violent headache, soporous condition, with light delirium ; complains of little or no pain (influenza).

*Natrum sulph.*—Sycotic pneumonia ; inexpressible agony ; slowly coagulated blood ; stitching pains running up from abdomen to left chest ; dry cough, with soreness in chest, rough feeling in throat, particularly at night ; had to sit up and hold chest with both hands ; loose purulent sputa in the morning.

*Nitric acid.*—Pneumonia of old and cachectic people ; sputa are raised with difficulty ; awakens, often all stopped up with mucus, and must expectorate before he can breathe more easily ; sputa of blood mixed with clots during the day ; pulse intermits.

*Nux vom.*—Broncho-pneumonia, especially of drunkards, or of persons suffering from piles.

*Opium.*—Infantile pneumonia, where the pulmonary inflammation is disguised by symptoms of cerebral congestion and oppression ; cyanotic color of the upper part of body, with slow stertorous respiration ; difficult intermitting breathing, as from paralysis of lungs ; blood thick, frothy, mixed with mucus ; great oppression, burning about heart, tremor, feeble voice ; anxious sleep, with starts ; legs cold, chest hot.

*Phosphorus.*—Broncho-pneumonia ; dryness of air passages ; excoriated feeling in upper chest ; great weight on chest or tightness ; chest sore, bruised ; hepatization of lower half of right lung ; dulness of sound on percussion ; bronchial respiration, frequently attended with crepitation and rattling. *Typhoid pneumonia*, not a genuine inflammation, rather an accumulation of blood in the veins and extravasation of fluid blood in the tissues of the organ ; the patient is weak,

with feeble pulse, sighs occasionally, is unable to use his lungs, not from pain, but merely from weakness and hyperæmic stagnation ; pulse thready ; cold sweat ; *pleuro-pneumonia* with extensive implication of the pleura ; hepatization, with mucus or bloody sputa ; coughing increases the difficulty of breathing ; during the third stage purulent infiltration of the parenchyma, with mental depression, slight delirium, carphologia and subsultus tendinum, rapid prostration, cold clammy sweat, small, feeble, frequent pulse, dim eyes, sunken features, dry lips and tongue, short, laborious breathing, oppression and anxiety, tedious cough and expectoration, involuntary diarrhœa ; threatened paralysis of lungs ; tuberculosis in tall, slender, weak-chested persons.

*Ranunculus bulb.*—Bright-red cheeks, with clean tongue ; short and very oppressed breathing, with scarcely audible respiratory murmurs ; dry heat ; prostration from the start ; small, very rapid pulse, with great vascular and cardiac excitement, nausea, and even faintness on motion.

*Rhus tox.*—Typhoid pneumonia, often from resorption of pus, with tearing cough and restlessness, as rest aggravates the pain and dyspnœa ; tongue red at tip ; loss of strength, sopor, hardness of hearing, unconscious defecation and urination, dryness and heat of skin, dry and sooty tongue ; dyspnœa worse from distention of pit of stomach ; sputa bloody or of color of brick dust, or green cold mucus, of putrid smell.

*Sanguin.*—Great difficulty of breathing, lies upon back, with head elevated ; not much pain in chest, but that of a stitching-burning character ; pulse small and quick ; face and extremities inclined to be cold, or hands and feet burning, with circumscribed redness and burning heat of the cheeks, especially after noon ; cough, with tough and rust-colored sputa, or in third stage purulent and offensive ; diarrhœa, night-sweats.

*Silicea.*—Chronic neglected pneumonia, passing over into suppuration ; dyspnœa when lying on back or coughing ; lungs feel sore ; excruciating, deep-seated pains in lungs ; sputa profuse, fetid, green, and purulent, often tastes greasy.

*Spongia*—Broncho and croupous pneumonia ; sputa tastes sour or salty, worse when lying down ; wheezing, anxious breathing ; burning and soreness chest ; during the stage of resolution with profuse secretion and expectoration of mucus, inability to lie down ; the cough relieved by eating and drinking (Caust.).

*Squilla.*—Suitable in pneumonia or pleurisy after bleeding, or when accompanied with gastric symptoms ; pain in chest worse mornings, also cough ; sputa copious and thin.

*Sulphur.*—Pneumonia assumes a torpid character, with slow solidification of the lungs ; there may still be much rattling of phlegm in chest ; frequent weak, faint spells, and flashes of heat ; feels suffocated, wants doors and windows open ; constant heat on top of head. Torpid typhoid pneumonia, with short

rapid breathing, a mere heaving of the chest ; cough and expectoration nearly impossible ; the patient responds sluggishly, comprehends slowly ; worse about midnight. Neglected pneumonia occurring in psoric patients, and which threatens to terminate in tuberculosis pulmonum, or in phthisis pituitosa. Pneumonia passing through its first stages normally and then remains stationary ; such a deficiency of reaction points to Sulphur as the remedy, where it accomplishes the absorption of the infiltration and, prevents suppuration.

*Tartar emetic.*—Pneumonia catarrhalis ; paroxysms of cough ; with suffocative arrest of breathing ; rattling hollow cough ; cough, with heat and moist hands, sweat about the forehead ; anxious oppression of chest, with rising of heat, reaching as far as the heart ; dyspnœa, with desire to cough and a quantity of rattling mucus in the chest ; œdema pulmonum ; impending paralysis of lungs ; cyanosis ; suitable especially to infants and old people.

*Veratrum album.*—Dyspnœa, with rattling of mucus ; fear of suffocation ; frothy serous sputa ; blue face, dry and spasmodic cough, accompanied by marked cerebral congestion ; hurried and small pulse, cold skin and *cold sweat*, with excessive debility ; capillary bronchitis, œdema of lungs ; suitable often to old people. •

*Veratrum viride.*—Pneumonia ; pulse hard, strong, quick ; engorgement of lungs ; sputa containing large masses of blood, with faint feeling in stomach,

nausea, slow and intermittent pulse ; constant burning distress in cardiac region ; heart beats loud, strong ; great arterial excitement ; great cerebral congestion.

—*The Homeopathic Recorder.*

## LYCOPODIUM.

(Continued from page 117, No. 5, Vol. XXVIII).

Joint pains are often accompanied by cramps and spasms of muscles. External heat generally relieves the pain, so as a rule does movement. Wasting muscles is common ( Lycopodium patients are often emaciated ), less from organic nerve disease than from general malnutrition and inability or unwillingness to exercise. The skin is not very characteristically affected by Lycopodium. Urticarial eruptions are perhaps the most generally seen, though chronic ulcers, if Lycopodium symptoms are present, do well on it. The dryness of the skin, especially of the palms, should be remembered.

In the genito-urinary sphere the drug is often called for. There is some evidence that it affects the prostate gland and chronic disorders of that organ may be benefited ; ( Baryta and Digitalis are more often helpful in enlarged prostate than any other remedies ). Especially is Lycopodium valuable in premature or temporary loss of sexual power either following masturbation or excess. Characteristic is sexual desire without sexual power. Gleet remaining after

gonorrhœa is often helped by it. In the female the periods are irregular, apt to be excessive (though not always) and there is generally increase of desire and local burning and itching.

The urine is increased in quantity, clear on being passed but depositing urates freely. Oxalates are often in excess. The urine is generally markedly acid and thus causes pain on urination in sensitive subjects. Renal calculus and gravel may be helped by Lycopodium.

The air passages and respiratory organs are (next to the alimentary canal) an important site of action of this drug. The voice is apt to be husky rather from tracheitis than from laryngitis: the cough is typically obstinate, dry and tickling, but there is also a condition met with in late phthisis or bronchiectasis that is helped by Lycopodium where the sputum is copious and purulent. It has great value in chronic lung affections, tubercular or pneumococcal, when any of the gonorrheal symptoms are present: but the evidence seems to point to its power being exerted less against tubercle specifically and more against the secondary infections (catarrhalis, streptococcus &c.) that so often are added to tubercle. The dry cough which it benefits is more likely to be pneumococcic or influenzal than early tubercular, and for chronic pneumococcal cases (pneumonias that resolve badly) it has great power. Chronic nasal catarrhs (catarrhalis, pneumococcus) will often benefit. There is noted often a tendency to slight capillary bleeding (not the



big hæmorrhages of tubercle, but the oozing of the surfaces) and the taste of blood in the mouth is often complained of. Asthma is often relieved by *Lycopodium* (cf. its relation to gout will be remembered and the time of the paroxysm frequently gives the indication).

As regards the heart, pain, palpitation and anxiety are often complained of, but they appear to be secondary to the metabolic disorders, and not due to primary heart lesions. Nevertheless if they are notably caused or aggravated by abdominal flatulent distension *Lycopodium* should not be forgotten. More important, however, is the effect of the drug in producing a great increase in consciousness of arterial pulsations, throbbing of arteries anywhere, and arterial excitement. This symptom has led to the use of *Lycopodium* for inoperable aneurism, and so much success has followed it, at any rate as a reliever of symptoms, that it is difficult not to credit the drug with some influence on arterial tissues. Remembering its relation to alimentary "toxæmias," and how often gout in all its forms affects arterial degeneration, it is probably from this side of its powers that *Lycopodium* achieves any results: it is in any case well worth remembering, competing in this disease with *Barium* and *Adrenalin*. In *Graves' disease* if the vascular symptoms are prominent, *Lycopodium* has a place, though perhaps *Natrum muriaticum* is here more often called for and *Belladonna* for the ready relief of symptoms.

*Lycopodium* patients often sleep badly, as the four

to eight aggravation may be continued through the early night or conduce to restlessness. In febrile cases the time aggravation should be marked if Lycopodium is indicated.

It is not too much to say that the physician who learns to use Lycopodium has at his disposal a most potent remedy for many chronic disorders, especially those common to civilized communities, and the classes who use nervous tissue rather than muscular. High potencies and infrequent repetition give the best results, but diseases of the alimentary canal will often be helped by low and medium potencies at any rate for a time.

• The drug follows Sulphur well. When joint and limb symptoms are prominent it frequently takes up and completes the work of Rhus. Iodine and specially Chelidonium are complementary to it in action. If Lycopodium seems indicated, yet fails, the case will often respond to Chelidonium and *vice versa*. Graphites, too, especially in its abdominal symptoms, is a drug to be remembered in its helpful relation to Lycopodium.

—*The North American Journal of Homeopathy.*

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## SANGUINARIA.\*

By CHARLES E. WHEELER, M.D., B.Sc.Lond.

*Physician to and Honorary Gillespie Lecturer at the  
London Homeopathic Hospital.*

*Sanguinaria Canadensis* ( Blood Root ) . *Tincture of the Root.*—*Triturations of the alkaloid have been used.* *Sanguinaria* is a comparatively recent addition to the materia medica but has established itself as a valuable remedy, more especially in acute and subacute disorders. It contains small quantities of alkaloids, chemically allied to those of opium, which paralyse sensory nerve-ends locally, make the heart beat more slowly and tend to excite the central nervous system. Sanguinarin, for instance, can cause tetanus and mental excitement, and violent peristalsis : it also increases the secretion of saliva. Traces of these actions are found in the provings where the whole complex becomes reasonably clear and precise enough to prescribe on. In its alkaloidal principles (which are by no means the only source of the drug symptomatology), *sanguinaria* also resembles *chelidonium* and in homeopathic practice we find a good many reasons for associating the drugs together in the mind.

*Sanguinaria* was used as a domestic remedy long before it was proved, mainly for "colds." It will be seen that the tests on the healthy give plenty of warrant for the use of the drug in some catarrhal affec-

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\* A paper read at the British Homeopathic Society, April 3, 1918.

tions of the nose and bronchi, and deeper diseases of the lungs.

Sanguinaria is not a remedy of very long lasting power, and consequently it is more often prescribed upon local symptoms than upon general constitutional ones. With drugs of this class mental and temperamental symptoms are relatively of less importance than with the profound and searching remedies of our materia medica. Nevertheless sanguinaria shows a noteworthy mental peculiarity in its pathogenesis that may prove a valuable guide. This is a hopeful disposition, an expectation to recover on the part of the patient, which is sometimes marked in quite grave cases. It recalls indeed the famous hopefulness of the phthisical, for it has no relation to the seriousness of the disease, but is an independent state of mind. Sanguinaria is one of the most valuable remedies in the acute stages of pulmonary tuberculosis on other grounds and the presence of this mental symptom is a strong additional indication for it. It is however true that this classical symptom is much less frequently observed now than seems to have been the case in earlier years, probably because there is so much popular knowledge and half knowledge disseminated today about tuberculosis, that it is rare to meet a case where the mental symptoms are not influenced thereby. Sanguinaria is often indicated in the absence of this mental symptom but its presence is a noteworthy suggestion for the use of it.

The respiratory organs are much influenced by

sanguinaria. The nasal mucous membrane is inflamed with a rather scanty discharge, which is usually acrid and causes very marked burning sensations. Burning of the nose and pharynx, burning of the tongue which is often red and not coated, these symptoms are often marked enough to recall arsenicum. If the discharge is free it is generally watery, which suggests that there is little or no leucocytosis and often the nasal conditions that need sanguinaria are chronic with thickening of the mucous membrane, and enlargement of the turbinates. Nasal polypus has been often treated with it, locally and constitutionally : it certainly is suited to some of the chronic catarrhs which precede polypus formation. The sense of smell is lost or perverted and there may be a great sensitiveness to the scents of flowers. Hay fever is a condition which often benefits from sanguinaria, especially when there is great nasal obstruction and burning sensations but relatively little discharge. Asthma may need it when there are nasal symptoms, and with this disease and hay fever there is generally definite disturbance in the gastric or hepatic regions also before this drug is well indicated. Descending the respiratory tract there is found a dry burning condition of the throat, a spasmodic laryngeal cough, which often causes vomiting (as with *drosera*), and this is specially indicative of the remedy when it is worse at night and accompanied by diarrhoea. Whooping-cough occasionally does well on it and for post-influenzal coughs in some epidemics it is nearly speci-

fic : since the sanguinaria cough can be fairly described as dry, exhausting, spasmodic and distressing, getting worse towards night and on lying down and on exposure to cold air, it will be readily seen that the drug has claims to consideration in this most intractable condition. Burning sensations in throat and trachea are frequent. Burning, indeed, is almost as much a feature of sanguinaria as of sulphur or arsenicum. Whenever there is sensory disturbance in a patient likely to need the drug burning will be prominent in the description of symptoms. It may be complained of anywhere—eyes, ears, palms and soles, chest and abdomen. Burning between the breasts has been used as a special indication for the use of sanguinaria in pulmonary tuberculosis, but beyond this uncommon symptom the drug complex is frequently recalled by the acuter stages and specially the early stages of phthisis. The characteristic cough has been already described ; it is irritative, distressing and rather ineffective, worse at night, and the sputum is seldom excessive, but may be offensive and blood-stained. Stitches of pain may be complained of. The cheeks are congested and the classical localized hectic flush is often seen : or there may be a more widespread rather dusky patch recalling those of opium, to which sanguinaria is botanically allied, but except for the cheeks the face is generally pale. Hopefulness of disposition has been previously commented on as a possible addition to the picture. Sweating is not as a rule very marked.

The cases of tuberculosis which do well on sanguinaria are nearly always early ones. Here it competes with sulphur and phosphorus. It is not nearly as profound in its action as these remedies, but for that reason it is often preferable to test the powers of action in tuberculosis with it, for it is well known that sulphur or phosphorus incautiously used may cause dangerous aggravations of tubercular lung affections. There is also a well-known smouldering type of phthisis, almost incurable (though the patients live for years), and subject to exacerbations and times of improvement. Sanguinaria is most helpful during the acute stages of this type of disease, and though it will not cure it does much to prolong life and make it more endurable. In such cases the deeper acting remedies are often dangerous and careful discrimination both of drugs and of potencies is called for.

(To be continued).

—*The British Homeopathic Journal*

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# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

"The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

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XXVIII.]

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[ No. 7 ]

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## PALLIATION AND CURE.

While lecturing to the students of the Calcutta School of Homeopathy, on the evil effects of palliation as practised by our friends of the dominant school, I was accosted by one of the students with the remark—that he had seen a very violent case of colic, promptly relieved by the injection of Morphia, and there was no repetition of the disease. Of course he could not say definitely how long this man had kept well and whether he had any metastasis from this or not. The evil effects of palliation by strong irritating substances are manifold :—constant use of the electric cautery has been known to cause cancer of the throat, repeated injections of Morphia resulted in cirrhosis of the liver in a case of hepatic colic, frequent operations on nervoid growths and benign tumours have caused



them to become malignant growths, and it is well known that irritation is one of the causes of cancer. I could add innumerable instances but that would not help matters. I have known a case of mammary abscess resulting in cancer after repeated operations, but I think the following lines of immortal Allen will explain my point much better than I can do :—

“Homeopathy palliates quickly in incurable diseases, and it maintains consciousness. Antipathic treatment seldom palliates pain or severe suffering without infringing in the field of consciousness. The same may be said of mania and acute insanity.

Hahnemann found, by actual experience, as we do to-day, that the higher he potentized, the more rapid and penetrating was the action of the remedy.

Section 56. Hahnemann speaks of the temporary suspension of disease by palliation as a delusion and a great injury to the organization.

He also tells us, in section 246, that experience has taught us that when remedies are chosen in high potential development, they are less revolting to the vital power. Selection of a remedy of a higher potential development is in the field of pure Homeopathy. No man other than Hahnemann can lay claim to this discovery.

By this method of prescribing, the vital powers are not assaulted but are allowed the proper time for counter-action (curative action), and the working out of these changes, both functional, and structural, due to diseased action of months' and years' duration.

Through our Law is discovered a so-called specific in the cure of disease that fits the individual case or patient, not disease.

The Homeopath distinguishes between law and mere rule of action. Natural law he affirms to be universal, admitting of no suspension nor substitute. It knows no intermediate ground, as the laws of gravitation or of light. It must be equal at all times and under all conditions for the most perfect attainment of its end.

Between the laws of Homeopathy and the theories set forth to-day Homeopathy harmonizes with all other natural law, and especially with every branch of medical science. It welcomes fellowship with nothing that is not governed by law. If we do not practise Homeopathy in its purity, we naturally cannot expect, nor do we look for fellowship with truth.

Are we improving Homeopathy? Then we are becoming better acquainted with its laws. Are we able to cure disease today better than we were a year ago? Then we are better acquainted with its agencies.

Improvement outside of Homeopathy was sought, outside of this law, for three thousand years.

We who love the Law and the teachings of Hahnemann, hold ourselves bound to the truths taught in the Organon. Our remedies are selected according to the principles involved in the Law of Cure.

A crude drug, when taken into the system, must, in the very nature of things, produce its own peculiar

poisonous effects: the vital force is deranged and offended.

A true conception of all disease is that it has its origin within the system, beginning invisibly by functional change, later followed by structural change. Even an eruption upon the skin is manifestation of the vital force expunging that which would otherwise become centralized. A syphilitic tumour on the brain, never appears unless the local skin or mucous membrane lesions are suppressed.

The laws governing potentiality are as sound and as true as the laws governing gravitation. In neither one can we find an injunction, an imperfect precept, or possible infraction. The limitation is found only in the individual. The Law of Similars is so great that it impeaches all those who attempt to add their man-made principles to it. No power yet has ever been able to make any inroad against Homeopathy where it is practised in its purity.

We claim that ability to teach is preceded by understanding the Law. The goal of Homeopathy lies in

- A thorough understanding of our materia medica\*;
- The art of properly examining a patient ,
- The selection of the remedy
- Knowledge of the correct potency , and
- The proper repetition.

To Dr. B. Fincke we are indebted for the conception of the best method of dynamizing medicine, which set aside the succussion-methods of the past. Dr. Fincke said to me a number of years ago :

"Potentization is division, not fluxion."

Fincke's potencies are made on the exact scale of decimals and centesimals. The liquid chain of measured potentiality is by his method unbroken.

The capability of our potencies, to retune the life-forces in disease, can never be fully appreciated, for in this retuning process the life-forces are never overwhelmed. In the co-operative processes harmony is apparent, the mental and physical together partaking, or rather entering together into that state of homeopathicity.

No man has seen that power within a drug that restores health, and no man has seen the potent thing called life whether in health or disease. We cannot see the beginning of that false physiological movement, in which lies the beginning of all disease. Hahnemann's dynamics revealed this to us. It is our legacy. He not only saw it, but to correspond to his conception of life framed a therapeutic Law known as "*similia similibus curantur*"

## PRACTICE OF MEDICINE.

### SPINAL MENINGITIS.

Inflammation of the membrane of the spinal cord is often a frequent occurrence. It may be acute and chronic.

**Causes.** From cold, syphilitic and rheumatic diseases, from fractures and dislocation. Traumatism.

**Symptoms.** Chill or shivering followed by fever in acute cases. Pain is experienced in the back and also on other parts. In chronic cases patients become irritable ; constipation and retention of urine. Then paralytic symptoms are developed. Gradually sensation is lost, urine and fœces involuntary and pulse is frequent. In two weeks respiration is impeded and death takes place.

Aconite is frequently the first remedy to be thought of. Pain is acute, paralytic symptoms, sensation of hands and feet lost and feels cold

Belladonna is for continual spasm, back pains, partial or complete paralysis, difficulty in breathing, urine involuntary.

Causticum—Back stiff and painful ; also the extremities, hands and feet cold, sensation lost.

Cuprum—Spasms of hands and feet which are also painful ; extreme prostration, spasmodic difficulty in breathing.

Hypericum—High fever, face red and hot, headache, pain in spine increased by slightest movement. From injury.

Secale—Used later on, meningitis with suppressed urine, spasm and pain.

Mercurius, Plumbum, Nux vom, Physostigma and Rhustox may be useful.

### MYELITIS.

Inflammation of the spinal cord. It may be general and partial.

**Causes** Traumatism. Fall or blow. Exposure to cold, excessive bodily work may be its causes ; compression of some tumor. Toxic diseases.

**Symptoms** It may be acute or chronic. Paralysis of motion is one of its prominent symptoms. There is weakness of the legs and difficult walking, spasms and twitchings are also noticeable. If the diseases last long, there is disturbance in sensation. Paralysis of bladder and rectum is a marked symptom. Involuntary micturition and constipation are the result.

Sexual function is nearly lost.

**Treatment** The patient should be kept in bed in perfect rest. Bed-sores may be prevented by appropriate measures. Nourishing food should be given. Baths cold or warm seem to help. Electricity may be tried, especially in chronic cases.

**Aconite**—Tingling and twitching. High fever. Loss of sensation but painful.

**Apis**—Pain in the back as if burnt, severe pain in pelvic region. Paralysis. Hands and feet emaciated.

**Arnica** From injury. It is also useful in chronic cases.

**Arsenic**—Twitching numbness, exhaustion from slightest exertion, spasms.

**Bellad.**—Pain in back and high fever, spasms like those of tetanus. Local and general paralysis.

**Gelsimium**—In the first stage of the disease with fever and muscular twitchings.

**Causticum**—For paralytic cases. Hands and feet become paralysed after standing or walking.

**Picric acid**—Tonic and clonic spasms, on standing legs become wide apart, staring looks : extreme prostration.

**Physostigma**—Paralysis, staggering gait, trembling, useful for youngmen Urinary troubles. I have seen a bad case with paralysis and debility cured with this medicine by Dr. B. L. Bhaduri.

**Mercurius, Phosphorus, Secale, Veratrum** are also useful remedies.

In acute cases lower potencies with frequent repetition are the best. In paralysis and chronic disease use of higher potencies with infrequent doses is the rule.

#### SPONDYLITIS.

**Inflammation of the vertebra.** Different portions of the vertebral column produce different symptoms. This inflammation is followed by swelling, softening and suppuration and ultimately destruction of the vertebra and consequent bending of the vertebral column. This bending is called curvature of the spine or Pott's disease.

**Causes** It is a constitutional disease. Scrofula and tuberculosis are its predisposing causes. Traumatism is a prominent cause.

**Symptoms** Pain in the back is a prominent symptom. Children cannot stand erect, become weak and exhausted. If cervical portion is affected, child cannot move the head, supports it by hands. • Cannot walk if dorsal portion is affected. Spinous processes become prominent and painful on pressure. Gradually pns is

formed. Patient succumbs after a prolonged suffering.

**Treatment.**—Must be resorted to in the beginning, for in advanced stage permanent damage is done to the spine and so there is no effect. In the first stage the child becomes irritable, expresses pain when it is touched with the hand and cannot walk properly. Phosphorus is the medicine. We generally use the 6th potency. This is followed by Natrum mur 6th in the same way for one week. After a few days improvement is visible. Dr. Baehr advised us to ~~act~~ <sup>continue</sup> this plan till the patient is cured. We have derived much benefit from acting according to this plan. A young boy was cured by us in this way. His neck was bent forward and a competent allopathic physician declared this case to be incurable.

If abscess is formed or about to be formed, Silicea 30 or 200 is the best remedy. For caries Calc. c. high followed by an occasional dose of Sulph. high is very efficacious. Psorinum may be substituted. Many physicians recommend Theredion as one of the best remedies in this disease.

From injury—Arnica, Hypericum or Staphysagria may be tried.

Medicine should be given at long intervals. Diet and hygienic rules must be strictly followed. Good, nourishing food, well ventilated house must be enjoined.

#### SPINAL IRRITATION

Spinal irritation is a function disturbance of the spinal cord.



**Causes** Generally found in young women ; it may be caused by sexual excess, emotional excitement and physical or mental overwork.

**Symptoms.** Pain in the back and loin is the principal symptom. Fatigue in walking or doing any physical work, sensitiveness of the skin or numbness and formication and even paralysis of sensation. Sexual power is very weak, and bladder is irritable or paralysed.

**Treatment.** All bad habits must be avoided, Sexual indulgence must be curtailed, nourishing food, walking in open air and general bathing are beneficial.

Nux vom. is one of the principal remedies and must be continued for sometime. Pain in spinal cord, dyspeptic and sexual symptoms of the remedy.

Cimicifuga—For women, palpitation from slightest exertion, pain in spinal column, suppression of menses.

Belladonna—Spinal cord burning with pain, dry cough and red face.

Cocculus—Hyperisthesia, upper portion of cord painful on pressure. Stiffness and pain in the neck.

Hypericum—If mania and other mental derangements accompany spinal irritation, it is useful. Pain in whole spinal column.

Natrum mur—Pain and hyperisthesia, anemia, constipation, menses scanty or suppressed, half vision.

Rhustox, Secale, Strychnia, 'Phos, Tarentula, Agaricus, Calc c, Picric acid, Phosph &c. may be consulted.

## COCCYODYNIA.

Pain in the coccyx is what is called Coccycodynia. It is neither neuralgic or rheumatic in nature.

**Causes.** Caused in most cases by cold or by traumatism. Women are most affected by this disease.

**Symptoms** Pain is the most distressing symptom; sometimes exactly on the spot and often distributed to the neighbouring parts; crackling sounds are often heard on pressing the part.

**Treatment.** If the pain is caused by injury and if there is crepitating sound on the part, Calc pños is the right remedy. Dr. Hering recommends Phos acid. Rhustox and Ruta are often indicated. We have been able to cure a bad case with Rhustox high. If after parturition, Cicuta v. is the best. In periostitis Mezerium is useful. Tarentula is to be given if pains are intense after parturition, which are aggravated by movements, pressure or standing. Causticum, Cistus, Kreasote, Phosph, Paris &c. are useful.

## CEREBRO-SPINAL FEVER.

It is characterised by an inflammation of the meninges of the brain and spinal cord. It is said to be caused by a germ called diplococcus intracellularis.

**Symptoms** There are often appearances of petechial eruptions and so it is called "spotted fever." Fever is the first symptom observed. There is chilliness, pain in the body, headache, retraction of the

head, delirium, convulsion and coma. Temperature rises from 101 to 106 F. Paralysis of different nerves occurs.

**Treatment** Gelsemium is the first remedy to be thought of in the beginning. High fever, drowsiness and headache. Dr. Humpal thought after Gelsemium Belladonna may be indicated and also Veratrum viride. For delirium and convulsion either Belladonna or Hyoscyamus may be given according to symptoms. Rhus or Bryonia also is useful in typhoid conditions either alone or in alternation with each other.

Arsenic is for blood poisoning. Fetid and putrid diarrhoea, extreme weakness and petechie in the body.

Cuprum acet is very good for convulsion and paralytic symptoms.

After failure with Belladonna and Hyoscyamus, Opium helps in many cases. We have cured such a case in a young child with Opium 6th. Dr. Bhaduri cured an extreme case with Kali iod.

### LOCOMOTOR ATAXIA

It is also called Posterior spinal sclerosis or Tabes Dorsalis. It is caused by disease of the posterior spinal cord. There is loss of co-ordination of the voluntary muscles of the body.

**Causes** Men of about 25 to 50 years of age are mostly affected. Syphilis is the principal cause of the disease. Excess in drinking and smoking and sexual abuse may be considered as factors for the production of this disease.

**Symptoms.** Some preliminary symptoms are observed before the actual attack. Amiaurosis, double vision, strabismus and pains in body, here and there, are said to be the principal symptoms before the invasion of the disease. But most characteristic symptoms are loss of knee-jerks, inco-ordination of the legs and gastric disorders. Disease develops slowly. Sensations are either lost or depraved. Patient walks and he thinks that his feet are on soft pillows.

P. C. MAJUMDAR, M. D.

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### SIMPLE MENINGITIS.

• The word meningitis has derived its root from the Greek word *meninx* or *meninges* = membrane, with the terminal *itis* = inflammation and means the inflammation of the membranes of the brain. It sometimes arises without any apparent cause ; or it can be produced by a fall or blow, or by disease of the ear or nose or by exposure to the sun. The poison of syphilis or rheumatism and also the deposit of tubercle may also produce meningitis. There are three membranes of the brain and they are Duramater, Arachnoid and Piamater. Inflammation of the duramater seldom occurs save as the consequence of blows or wounds or some disease of the bones of the skull. In treating of meningitis, it is common to distinguish between inflammation of the duramater, and that of the arachnoid and piamater. Speaking generally, the chief symptoms of meningitis are fever, acute

pain in the head, irritability with early and violent delirium, frequent flushing of the face followed by pallor, hard pulse, muscular twitchings, prostration, and drowsiness with coma.

Our knowledge of the effects of inflammation of the parts within the cranium (the Encephalon, from Greek word *en* in and *kephale* the head) is scarcely perfect to enable us to point out with certainty the symptoms which indicate inflammation of the *substance of the brain* called *cerebritis*, as distinguished from *that of the membranes of the brain* called *meningitis*. Fortunately the distinction (though desirable to frame a perfect diagnosis) is not of much practical importance; for if we allow that in a very few cases *cerebritis* occurs simply, or that *meningitis* happens alone, still it is certain that in the majority of instances the two affections are combined. This combination is generally called *encephalitis*, the particulars of which I shall speak of hereafter.

Taking a special example of the inflammation of the arachnoid and pia mater over the convexity of the brain, there is first noticed a rigor, or in stead convulsion (specially in the case of children). The skin becomes hot and dry, the countenance expressive of anxiety and suffering, and the bowels get confined; while there is intense pain in the head, which is increased by every sound and movement. The temperature is elevated but not so high as in many kinds of fever, seldom reaching 102°. The face is alternately flushed and pallid; the conjunctivæ are injected

while the eyes are suffused and staring. Sometimes the existence of optic neuritis and retinitis has been shown. The delirium sets in early, the patient being noisy and very violent. There is great restlessness, muscular twitchings, and sometimes strabismus. Vomiting is constant and is an important feature. The above symptoms generally last from 3 to 4 days; when the fever lessens, the pulse flags, the tongue gets brown and dry, the excitement diminishes, the delirium is apt to pass into coma. In a few days more, the prostration has become extreme, and the symptoms get to resemble those presented in the last stage of typhus. When the disease ends favourably, the improvement is usually very slow, being unattended by any critical sweat or looseness of bowels. It is known to every medical man that headache from gastric disturbance is as common as vomiting from cerebral derangement. A sick headache (i.e.) retching with distressing pain in the head, is the special symptom of stomach derangement. In children, obstinate vomiting is particularly indicative of brain disease.

**The distinction between the Gastric or Hepatic from  
Cerebral sickness.**

(1) Gastric or Hepatic vomiting. The nausea is relieved, at all events temporarily, by the discharge. Food returns, as soon as it is taken.

(1) Cerebral vomiting. Little or no nausea, and the vomiting continues in spite of the discharge of contents of the stomach.

(1) There is tenderness over the liver and stomach. Pressure induces the inclination to retch.

(3) The pulse is frequent and weak.

(4) Tongue furred, breath offensive, conjunctivæ often yellowish, and headache secondary as to time.

(5) Gripping abdominal pain, diarrhœa, and clay coloured stools.

(6) Retching, and increased salivation.

(7) Sickness lessened by counter irritation to epigastrium only.

(8) Complete disgust for food.

(2) No tenderness over liver or stomach. Pressure borne without inconvenience.

(3) The pulse is infrequent and hard.

(4) Tongue clean, breath sweet. Conjunctivæ colourless, or injected ; and headache primary.

(5) Generally obstinate constipation.

(6) Stomach emptied without effort, no salivation.

(7) Sickness lessened by counter irritation to nape of neck only.

(8) No disgust for food : perhaps the reverse.

On the one side vomiting depends upon derangement of the liver or the gastro-intestinal canal ; on the other, it is owing to increased sensorial or reflex action. But there is one peculiarity, which requires explanation. Vomiting due to increased reflective mobility is not always caused by cerebral disease. Thus, it occurs

during pregnancy, as well as in certain uterine and ovarian disorders. Moreover, the most severe case of constant vomiting may be due to a slight ring of cancerous deposit around the œsophagus, in the cardiac orifice of the stomach.

Inflammation of the duramater is generally the result of violence or of tertiary syphilis, or of disease of the bones of the skull—particularly of the porous portion of the temporal bone or of the ethmoid. With children, chronic affections of the ear and nose, which are often regarded as trifling, sometimes terminate fatally by a rapid extension of the morbid action to the *duramater*.

I should mention here that Hahnemann says that true inflammation of the brain never attacks adults, except perhaps in typhus and certain cases of poisoning and his saying has been supported by Dr. Jahr too.

TREATMENT :—In symptomatic *meningitis* in typhus, *erysipelas of the face*, in some cases of influenza, even after the sudden suppression of simple catarrh, in consequence of the affection spreading to the frontal cavities, when the brain symptoms assume a very threatening form and set in with the most violent pains and an almost furious delirium, *Bell* will act like a charm. In these cases, Dr. Jahr prefers *Bryonia*, only if the delirium is milder, and the pains are severe, shooting and tearing in character. If *Bryonia* fails, *Glonoin* may afford relief sometimes. *Cuprum* may help if inflammation of the brain is accompanied with convulsions and lockjaw. After suppressed



*eruptions*, *Apis mel* deserves very properly even preference to be given to Bell. Cerebral irritation, consequent upon sunstroke, yields to Glonoin more speedily than to Bell.

(The most efficient treatment for sunstroke is to rub the patient very hard with pieces of ice until the skin begins to burn and consciousness returns; after which Acon or Bell may wind up the treatment.) If erysipelas invades the cerebral membranes and Bell and Bryonia do not afford relief, *Cuprum* may be tried with successful results with 30 and 200 attenuations especially if there be convulsions of extremities.

In tubercular meningitis, in the case of young people who are affected with tubercles in the chest and abdomen, a violent fever with headache and delirium sets in, and neither typhus nor an acute exanthem can be diagnosed, however small and Bryonia is of least use. *Nuxvom* may be used with good result. Calc. carb and Phosph are the only remedies, which can do any essential good in such a case.

#### *Meningitis of Children* —

Here we can expect much from Bell 30 and Bell 200, a teaspoonful of a solution of 3 grs in water every 3 hours. If this disease runs into the shape of acute hydrocephalus and Bell fails to do any good, Dr. Wahles strongly recommends Bryonia 30, one globule dry on the tongue, and still more of Sulph 30. If the disease has entered upon the third stage, that of fully developed effusion, Hellebore can be used here with much more good result and still more certainly by

Sulph and *Apis mel* 30. Lately I had the opportunity in treating a child of 3 years in the house of Dr. Pran Tosh Laha, L. M. S., Rishra, suffering from meningitis; when I had given up all hopes of saving the little patient by all other medicines, I gave him *Helleb.* as a last resort and with such a marked effect, that 2 doses of this medicine brought back the child to life.

**Special indications of specific medicines in meningitis** -

*Bell*—It is undoubtedly the most comprehensive and efficient remedy in all kinds of irritations and inflammations of the brain and its membranes, which should always be our first choice except solely in *tubercular meningitis* and in hydrocephaloid conditions of the brain, provided *Bryo.*, *Cupr.*, *Hoyse* or *Stram* are not more specially indicated. Dr. Farrington says, *Bell* does not develop positive inflammations of the meninges, but rather the collateral symptoms of the inflammation only. Thus, *Aconite* causes an absolute inflammation of the meninges with increase of exudation, *Bryo.* causes inflammation, with an exudation of leucocytes and blood plasma, constituting complete inflammation. But *Bell* rather seems to provoke congestion only. The surcharged blood vessels seem to have ruptured, producing little reddish spots or ecchymoses in the tissues, thus producing a congestive irritation in the brain beneath the membranes. If exudation follows this congestive irritation, the exudate is serous, and is just the kind that results from venous congestion. It is not the inflammatory exudation, rich in plasma, which is pictured under

Bryo., Apis, and Sulphur. Nevertheless, *Bell*, produces so many collateral symptoms of cerebral irritation, that it is indispensably necessary in inflammation of the brain and its membranes. But in *tuberculous meningitis*, Sulph, Cal carb and Apis do more good than Bell. Then again when exudation has taken place, as indicated by the persistence of the rolling of the head and sudden shrieking, we must resort to Apis and Bryo.

*Apis mel*—In meningitis or in meningeal irritation Apis holds a prominent position as a curative agent. It is often the remedy, no matter what the ailments, when the shrill outcries in sleep lead to the suspicion of cerebral irritation. Such cases frequently begin with the nervous fidgetiness so characteristic of the bee-poison, and advance to more serious conditions. In *Tubercular meningitis*, or in acute *cerebral effusions*, a suppressed or undeveloped eruption is a good guide to the choice of Apis. A little care will enable us to distinguish the fidgety nervousness of the Apis from the more intense cerebral irritation of Bell. The congestion of Bell is more violent, with throbbing of the carotids, injected red eyes and drowsiness broken by starts and frightened outcries. The adynamia is much less than in Apis. If the disease is scarlatina, the rash is smooth and bright red, but not milliary. The skin is hot and the face red or in some cases pale; but not pale and œdematous as in Apis,

If there is meningeal irritation, Bell is needed when the congestive symptoms are intense; Apis when the

nervous agitation predominates, with the shrill cry, which betokens stabbing, piercing pains or excitement. In meningitis Bell is decreasingly indicated as the symptoms of effusion increase, while Apis is increasingly indicated as long as the symptoms of irritation obtain and cephalic cry is marked.

It is called for in meningitis when exudation has taken place.

Helleborus—It claims precedence in meningitis when the irritation of Apis gives place to mental torpor, with want of reaction. The forehead is wrinkled, the pupils dilated, and the lower jaw tends to drop; the sopor is complete. There are automatic motions of one arm and one leg; this automatic motion may recur at regular intervals, and the forehead is bathed in cold sweat. In such cases Helleborus may bring about reaction so that another remedy will cure. Bryonia is required for cerebral effusions following suppressed exanthemata. The sensorium is benumbed but the senses are not so much perverted as in either Apis or Helleborus. In Bryonia, there is *constant chewing motion*, the face is dark red, the lips parched, when offered a drink, it is taken hastily and impatiently. When the sensorial depression amounts to sopor, Helleborus follows well, even if the chewing motion and hasty drinking continue. Apis follows if the sopor is accompanied by a more shrill cephalic cry than in either Bryonia and Helleborus. In the Helleborus child, the eye-balls are drawn upwards, so that you can scarcely see the cornea, the face becomes flushed

and then gradually turns pale. When offered a drink of water, the child seizes the glass with avidity, as if it were much thirsty ; this it does, not only on account of the thirst, but also of the nervousness. In addition there is shooting pain in the head. If the patient is a child, and unable to describe this, it may be noticed by the sudden screaming or crying out that it has these sharp shooting pains ; and sometimes the child's head is jerked to one side and arm thrown up over the head and it bores its head into the pillow. The bowels are usually constipated. The urine is dark, scanty and loaded with albumen.

*Cuprum*—Cuprum compares with Apis when meningitis results from a suppressed exanthem. Cuprum causes loud screaming followed by violent convulsions ; the thumbs are clenched, and the face is pale with blue lips ; the eyeballs are constantly rotating. If the convulsions occur in the Apis case they are less violent, consisting of restlessness and twitching of one half of the body ; the other half is lame and trembles. In cuprum, there is predominant spasm of the flexor muscles : the face is usually red, or purple ; the teeth are clenched ; the child foams at the mouth.

*Zincum*—Here it is indicated when, in the beginning, either of a case of rheumatism, or in fact from any cause with sharp, lancinating pains through the head, they are worse from wine, or from anything that stimulates. There are pressing, tearing pains in the occiput particularly in the base of the brain and seem to shoot through the eyes and teeth. There is distressing cramp-

like pain at the root of the nose. Now these symptoms will suggest *Zincum* in quite a variety of ailments, but especially in meningitis, arising from the non-development of an eruption.

*Glonoine*—Like *Apis*, it has the cephalic cry ; there is a sensation as if the head were enormously expanded. Spasmodic vomiting of cerebral origin is most prominent, as also is intense congestion and throbbing.

*Rhus tox*—Though incompatible with *Apis*, has many similar symptoms. In scarlatina, both suit in adynamia, swollen throat, erysipelatous inflammation of the skin of the neck, miliary rash, drowsiness and œdema. In *Rhus*, the eruption is darker, erysipelas dusky red, and there is great bodily restlessness, not the fidgetiness of *Apis*.

*Bryonia*—When the meninges of the brain are affected, *Bryonia* is a valuable remedy. It follows *Bell* rather than *Aconite*. *Bell* ceases to be the remedy of meningitis, whether tubercular or otherwise, when the effusion within the ventricles or beneath the membranes commences. It then gives place to *Sulphur* in some cases, *Apis* in others and *Bryonia* in still others. *Bryonia* is indicated when meningitis follows the suppression of some eruption, as that of scarlatine or measles. The child's face is pale, or else it is red and pale alternately, the tongue white. The child screams out suddenly as if it were in great pain. These pains are of sharp lancinating character and specially manifested on moving the patient. There is marked squinting with one or both eyes. The bowels are usually constipated, the abdomen distended and the child has well marked sensorial depression which seems to

border on stupor. If you arouse the child and offer him drink, he takes it impetuously or hastily, just as under Bell. The Bell. patient has more rolling of the head. Bryonia bears some slight resemblance to Apis, for cerebral effusions following suppressed exanthemata. The sensorium is benumbed, but the senses are not so perverted as in either Apis or Helleborus. There is constant *chewing motion* in Bryonia, the face is dark red, the lips parched; when offered a drink, it is taken hastily and impatiently. If the child is moved, it screams with pain. Later, when the sensorial depression amounts to sopor, Helleborus follows well even if the *chewing motion* and *hastily drinking* continue. Apis follows if the sopor is accompanied by a more shrill cephalic cry than in either of the other remedies. Bryonia comes in between Bell and Apis in meningitis; Bryonia acts on serous membranes, causing copious exudation. It is indicated after Bell. The child becomes more stupid from increased pressure on the brain. The face suddenly flushes and then becomes pale, usually a bad symptom. The child cries out, particularly when moved, even the least bit; this is the characteristic symptom. The abdomen is distended and the tongue is usually coated white down the middle. In reviewing symptoms of the drug, it may be said, that Bell does not develop positive inflammation of the meninges, but rather the collateral symptoms of the inflammation only. Thus Aconite causes an absolute inflammation of the meninges with an increase of exudation; Bryonia causes inflammation, with an exudation of leucocytes and blood plasma, constituting complete inflammation. Bell seems rather to provoke congestion only. The surcharged blood vessels seem to have ruptured, producing little reddish spots or ecchymoses in the tissues, thus exciting congestive irritation of the brain beneath the membrane. (*To be continued*).

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THE INDIAN  
HOMEOPATHIC REVIEW

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collateral sciences

\*The knowledge of the use of knowledge of remedies and the knowledge of their employment constitute medicine

-ILAHNMANN

XVIII ] AUG. 1, 1912 ] No. 8.

## • HOMEOPATHY DURING THE WAR.

Now that the Continental War is happily over, we pause to think what homeopaths have done during the war. As we state<sup>1</sup> sometimes ago no less than one thousand doctors of our rank joined the American Army Medical Corps, who came over to France to relieve the sufferings of the Allied Army. Their work was greatly appreciated and now they are returning to America in great glory. We are proud of their brave achievement. In England also our homeopathic brethren did their share of the work. The London Homeopathic Hospital set apart a large number of beds for our British soldiers. And the authorities of the Hospital received the special thanks of the Admiralty. We had a Homeopathic Hospital at Neuilly in France which did splendid work for two years and received the special thanks of the French



military authorities. Thus it is that our homeopathic brethren acquitted themselves during the long period of the trying world war which has now happily come to a close to the glory of the British and the Allied arms. It is also very gratifying to feel that those that were not fortunate enough to join the war, did their best to help the work with their financial support.

J. N. M.

### · SIMPLE MENINGITIS.

(Continued from page 168, No. 7, Vol. XXVII).

*Hyoscyamus* :—It is indicated in meningitis, when the patient seems to have been labouring under a sort of mania, which has for its key-note extreme excitation of the sensorium. The patient seems to feel relief from shaking the head or sitting with the head bent forward. Here it is exactly opposite to Bell. The patient complains of pulsating waves through the head.

*Arsenic* :—It is similar to Apis in many respects in this disease. Both have anxious change of place, fear of death, restlessness, great weakness. Irritability of mind occurs in both but it is more an anxiety and fear in Arsenic ; more a nervous restlessness in Apis. If they meet in cerebral affections, especially in hydrocephaloid, Ars is to be selected by hot skin, pale and hot face. The child lies in stupor ; suddenly it twists its mouth, and a jerk goes through the body,

or the child lies as if dead, with half-opened eyes, dried mucus on the conjunctivæ, and no response to touch upon the eyelids. Hyosc and Lach are similar in jealousy.

DR. D. R. DUTT,  
Serampore.

## PRACTICE OF MEDICINE.

*(Continued from page 157, No. 7, Vol. XXVIII.)*

The gait is unsteady, walking like a drunken man. Sexual power is also utterly lost or depressed. Urination may be involuntary. Walking in the dark becomes almost impossible. Muscular power is also lost. Gradual hyperæsthesia or anæsthesia may result. General muscular emaciation.

**Treatment.** Bad habit of tobacco smoking and wine and spirit drinking must be stopped. Plenty of nourishing food, cold bath, and regular exercise must be enjoined. Electricity may be tried and in later stage it may do good.

Numbers of medicines in Homeopathy are very efficacious in this disease. They should be taken patiently and perseveringly.

Alumina is one of the best remedies in locomotor ataxia, ptosis, tottering gait, soft pillow under the feet in walking. Bœnninghausen recommends this as very useful.

Argent met and nîtricum. Cannot walk in the

dark, anæsthesia and paralysis, sexual power is depressed. Dr. Hart cured a case of syphilitic origin after failing with Iodide of Potassium with Argent met. We cured a case at Benares of an old lady with Argent nit 200.

Dr. Allen praises Cuprum Iod as a good remedy in this disease. We gave it to one of our patients but the result is not known.

Belladon—Restlessness, steps in with force, ocular disturbance.

Helleborus—Feet cannot go properly, weakness, muscles heavy and painful.

Gelsemium—Paralysis of hands and feet, cannot raise up feet from ground, electric-like pain in body, trembling of feet.

Nux vom—Feet are numb and paralysed, knees give way, extreme weakness, paralysis of bladder.

Phosphorus—Spinal irritation, paralysis of hands and feet, emission of semen. We cured a bad case with various potencies of Phosph.

Physostigma—Patient cannot walk, stick or some one should support him. A clerk had trembling of hands and tottering gait with paralysis of bladder, and urine loaded with phosphate. Dr. B. L. Bhaduri after a prolonged treatment cured him with this medicine.

Picric acid—Muscular power is lost, so the patient cannot walk. Great mental and physical weakness, sexual excess and seminal emission.

**Rhustox**—Dragging of legs and exhaustion, paralysis, and desire to lie down all the time.

**Secale cor**—Trembling of hands and feet, walks with difficulty, as if ants are crawling under the skin.

**Zincum**—Hands, feet and back weak and painful, greatly tiresome, cutting pains. **Zincum phos** is preferred by many. **Agaricus**, **Angustura**, **Arsen**, **Calc c**, **Causticum**, **Conium**, **Silicea**, **Plumbum**, **Phos ac**. and **Sulphur** may be tried according to symptoms.

### NEURITIS.

Inflammation of the nerves. It may be local—one nerve is affected, or general—several nerves are involved. This is called multiple neuritis.

**Causes.** May be caused by exposure, rheumatism or by injury. Women are most affected between the ages of 25 to 50. Infectious diseases and poisons are also among the causes.

**Symptoms** Pain is the first symptom found. In localized neuritis it is in the particular place supplied by that nerve which is also very sensitive to pressure. Numbness and tingling are also noticed. Part may be swollen and red.

In multiple neuritis the attack is sudden. There are fever and other neurotic disturbances. Pain is very acute, the patient cannot bear it. Motion is more or less affected.

**Treatment.** **Aconite** is the first remedy suggested with its fever, restlessness and acute pain. **Belladonna** also has fever and acute sensitiveness to pain. **Arsenic**

pain is aggravated at nights and there is great weakness. Causticum in chronic cases. Cimicifuga and Kalmia in rheumatic cases with heart complications. Nux vom for excess in drinking alcohol and sexual abuse. Phosphor where pain is more in the evening and better by warm applications. Rhust, Merc sol, Pulsat, Cactus should be remembered.

#### NEURASTHENIA.

Neurasthenia is nervous weakness. There is cerebral neurasthenia or spinal neurasthenia.

**Causes.** Excess of work or dissipation and worries of mind. Now-a-days our people indulge in excessive work or business anxiety.

**Symptoms.** Patient cannot concentrate his mind on any subject. Mental irritation and pain in the scalp. Black spot before the eye. He is depressed and morose, sometimes hypochondriacal. Extreme prostration, palpitation of heart. Dyspepsia and sexual debility often present. Fear of disease gives him great anxiety. Pain and tired feeling in the spinal cord.

**Treatment.** Symptoms must be carefully observed. Arnica is one of our best remedies. Extreme prostration, anemia. Irritable and fearful. Pains in various parts, urine red and phosphatic.

Calc. hypophos—Nervous debility, mental depression, profuse sweat at night, face pale, sexual inability, sleepless and voracious appetite.

Coca—Sleeplessness, laziness, mental depression. Palpitation, constipation and tympanitic abdomen.

**Ignatia**—Disease from mental depression and griefs. Loss of memory, sighing breathing, coldness of hands and feet.

**Phosphoric acid**—From sexual excess. Body cold, constant and profuse urination.

**Picric acid**—We have cured very bad cases with its cold feeling and cold perspiration. Tired feeling, from even light work, excess of phosphate in urine. Pulsat, Rhust, Secale, Zincum, Phos and Anacard may also be required.

### CHOREA.

It is also called St. Vitus Dance. It is a nervous disease characterised by involuntary movements of voluntary muscles.

**Causes.** Boys and children are mostly affected. Girls are oftener affected than boys. Heridity plays an important part in the causation of chorea. Fright or fear or any other emotional disturbance is the cause of this disease. It is often complicated with endocarditis.

**Symptoms.** Constant involuntary movements are the chief symptoms. One side or both sides may be affected. Arms and legs are thrown about or tremble. There are two kinds of this disease—the common form and the severe form. Mental symptoms are often present. The patient becomes irritable, sorrowful or capricious, and in rare cases hallucinations are present.

**Treatment.** Agaricus is one of the prominent medicines in this disease, the affected parts are chilly as

if a piece of ice is there; contraction of muscles, pain in spinal column, sexual debility, nystagmus.

Cuprum met.—It is our great anti-spasmodic, so it is given when no other symptoms of other medicines are present.

Stramonium and Hyoscyamus are very useful in spasm as well as mental hallucinations.

Nux vom is a grand medicine if the disease is worse in the morning and from indigestion. It is useful for worms, if Cina or Cicuta does not help.

Zincum is useful in chorea of feet and in cases of nervous prostration. Causticum, Graphites and Rhustox., &c.

Cimicifuga—Pain from uterine and ovarian irritation.

Colocynth is one of our best remedies. Right side is mostly affected. Pains aggravate in the day and not at night. Pain from rage or mental irritation.

Naphalium—Severe pain in the nerve. Numbness, use of limb is attended with severe pain. Left-sided sciatica is many a time cured by us with this remedy.

Lachesis—Great burning, palpitation of heart, heat.

Ledum—Pain in hip-joint, rises upwards.

#### EPILEPSY.

It is called falling sickness.

**Causes.** Heredity plays an important part in the causation of this disease. Women are more affected than men. It often follows injury. We have seen some cases from this origin. Some tendency of the nervous system seems to be the cause of this disease.

**Symptoms.**—There are two varieties of epilepsy—Grand Mal or usual form and Petit Mal or mild form. In the former the attack is preceded by an *aura*, a peculiar premonitory symptom. There may be changed sensation of part, as insect crawling in or the patient fancies a peculiar taste or odour. In some cases there is no warning, the attack comes on suddenly. May be an involuntary cry and the patient falls down in a tonic spasm. Respiration is hurried, general trembling of body and head turns on one side. The patient may bite his tongue. There may be involuntary urination and defecation. After a time the patient falls into sleep and the fit is over. In Petit Mal the symptoms are mild, only a momentary loss of consciousness and slight spasm.

**Treatment.**—Cuprum is one of the best remedies for epilepsy. We have cured many cases with it. Convulsions at night and also during teething and after suppression of eruptions of any kind. Violent spasms, hands and feet cold, shrill cry before the attack.

**Plumbum.**—Dr. Baehr praises this medicine. Spasms commence with an aura in abdomen. It is particularly useful in old cases. The patient regains consciousness gradually. Extreme weakness and paralytic condition.

**Calc. c.** is a good constitutional remedy. Sudden vertigo before convulsion. Disease at night and during new and full moon, commences from abdomen.

**Belladonna.**—It is useful in acute attack, as if rats



are under feet or heat from stomach. Breathing hurried and dreams.

*Cicuta v.*—Very useful for children. Trembling of head and body, vomiting, weakness, tonic and clonic spasms alternately. After spasms exhaustion and sleep.

*Opium*—We have cured a case with it. Stertorous breathing, cyanotic face, half-closed eyes, deep coma. Of other medicines, *Agaricus*, *Absinth*, *Cocculus*, *Hyosc.*, *Stramon*, *Artemesia*, *Lycopod* and *Sulph*. Simple food, no meat and eggs.

During fits medicines may be given by inhalation and in the interval indicated medicines administered at long intervals and preferably higher potencies.

#### NEURALGIA.

Disorder of function of the sensory nerves is called

Very severe acute pain is felt in this disease.

*Causes*.—Family predisposition, ill health, overwork, worry and bad living. It occurs generally in the middle age of life. Exposure to cold and damp, hurt or injury, pressure of new growths on the parts.

*Symptoms*.—Affected part becomes numb and cold at first. Then sensation of aching and pricking. Pain usually follows the course of the nerve. There may be anæsthesia or hyperæsthesia of the part. Constitutional symptoms appear later on. Periodicity plays an important part. Certain important forms of neuralgia are mentioned here.

1. Facial neuralgia or Neuralgia of Trigemini, Tic douloureux. Prosopalgia. In this form one or

more branches of the trifacial nerve are affected, generally one side. During the attack teeth may be affected, very sensitive. It may be caused by the diseases in other parts of the body as ear, nose or teeth. Pains located generally on the supra orbital foramina.

2. Occipito-cervical neuralgia involves the upper cervical nerves, usually both sides. Pain point is midway between the mastoid process and the upper cervical vertebra.

3. Neuralgia of the Brachial Plexus. In this form four cervical nerves are affected. It is caused by spinal caries &c. Pain in the upper arm, over the ulner nerve, at the inner condyle.

4. Intercostal neuralgia. The fifth to the ninth intercostal nerves are affected, more often in women and on the left side.

5. Neuralgia in the region of the Lumber Plexus is very rare. Pain in the lumber region, about the buttock or in the gluteal region down the thigh and leg.

6. Sciatica is in the sciatic nerve and is a very common form to be considered separately

**Treatment** -- Pain is lessened by Opium, Morphia &c. but these are very injurious, should never be resorted to. Homeopathic medicines selected according to the indications act wonderfully. Electricity is useful but to be carefully applied. Aconite, Arnica, Arsenic, Bellad, Bryonia, Chamom, China, Cedron, Cimicif, Cocculus, Coffea, Gelsem, Ignatia, Mer c, Nux vom,

Pulsatilla, Rhustox, Staphysagria, Tarentula, Veratrum and Zincum are the principal remedies.

Aconite is one of the best remedies in this disease ; restlessness from pain, aggravated from cold. In acute cases

Argent nit—Pale face, taste bad or acid taste,

Arsenic—Burning and stinging as if hot needles are driven in, aggravation of pain after 12 midnight. Better by warm applications. After malaria or poison in the system,

Belladonna—Cutting or tearing pain, generally in the afternoon, hard pressure relieves the pain.

Calc. c—Pain from right side of face to the lower jaw, extends to the ear, worse by warmth, better by cold.

Causticum—From right face to mastoid process more at night, better by cold application, chilliness,

Cedron—Pain commences exactly at the same hour. Better in malarious cases,

China—Infra-orbital pains, especially in malarious cases. By slight touch, and lying down, and at night pain increases,

Chinin sulph—Fever every day at the same hour, free from pain in the intervals. Best in malarious cases,

Cimicifuga—Ovarian or uterine neuralgia, teeth and jaw are affected, Great prostration,

Colocynth—Stretching and tearing pains, worse on touching the left side. Better by rest and application of heat

Lachesis—Left side, from face to eyes, head hot before pain commences, aggravated after sleep.

*(To be continued).*

P C M

## THE CHOLERA EPIDEMIC

### A GREAT ABATEMENT

#### EFFECT OF CORPORATION'S MEASURES

#### SOME PRECAUTIONS

*(Special to the "Englishman")*

• This year's hot weather in Calcutta has been marked by an epidemic of cholera which although severe has been prevented from attaining far worse dimensions by the activity of the Health Department of the Corporation under Dr. W. J. Lubeck, Officiating Health Officer and Dr. C. H. Plumes, the Health Officer for the Port of Calcutta. The epidemic began to assert itself early in March. The deaths from the disease in the week ending March 1 numbered 58 which is about normal. By March 8 they had reached 74 and by the next week 77, which was eleven above the quinquennial average. Since then deaths increased considerably in number until in the week ending April 27 they had reached 279. That was the culminating point of the outbreak and since then the deaths have declined, in the week ending May 5 reaching only 165. Followed a further consistent drop to 79 in the week ending June 7. But even that figure is much above the quinquennial average. On June 13 the deaths numbered only 13 out of 65. The disease, however, is still considered by the Board of Health (Colonel Deare, Colonel Leventon,

Colonel O'Kinealy and Drs Lubeck and Elmes) to be "epidemic." The manner in which the outbreak has been handled and kept within bounds reflects the greatest credit upon the authorities and upon Drs Elmes and Lubeck who have been acting in conjunction.

The Corporation happened to be equipped very satisfactorily to deal with such an epidemic. Calcutta is nearly always fighting some dangerous epidemic or another—cholera or small-pox, plague or, of late, influenza. Cholera, small-pox and plague have been adjudged epidemic for weeks past, but the Health Department found the special organisation introduced to combat influenza of great value when cholera began to assume a more threatening aspect than usual. The temporary staff which has been dealing with the influenza outbreak was when cholera became abnormal diverted to special measures to deal with the menace. The staff thus available was divided by Dr Lubeck into twelve special units each of which was equipped with a complete "cholera outfit," which includes the means of treating the disease upon Sir Leonard Rogers's system of intravenous saline injections, by which an attack can be dealt with in the sufferer's own house, as well as in hospital, whither it is often difficult to persuade Indians to go. As the decrease in the epidemic shows, this move was successful in limiting the outbreak and when once it was in hand of reducing it in dimensions far more quickly than it rose to its height. Now another move has been taken for the safety of the city. It is well-known that there is no accommodation for the gangs of coolies that are collected at Outram Ghat to sail for Rangoon by the mail vessels in order to take up employment. At any time this is unfortunate but with cholera about in an unusual quantity this state of affairs becomes a public danger. So in order to minimise the risk both to the coolies themselves—who are now being

assembled to deal with the Burma rice-crop—and to Calcutta, the whole of the batches who would otherwise be waiting on Strand Road have been housed in the old Surinam Emigration Depot at Garden Reach where they will find ample accommodation and can be isolated if occasion requires.

#### HOW CHOLERA OCCURS.

There seems to be a great many mistaken notions afloat about cholera and it would perhaps be as well to show here how infection is carried and how it can be evaded. In one case in which a European is the sufferer it was said that the illness was due to eating on over-ripe mangoes. For the relief of mind of any who may suspect a very succulent delicious fruit on these grounds it may be said that there is no danger of cholera being contracted in such a manner. Although it is unwise to eat over-ripe fruit, so long as the skin is intact no fruit can contain the cholera bacillus, which must have actual entry into an edible to infect. The danger in eating over-ripe fruit is that the skin may not be entire and the germs may have reached the interior. But there is always a danger that in eating a fruit any bacilli that may be on its exterior may be conveyed to the person eating it. And bacilli are apt to be found anywhere. Thus for instance if a mango or a banana is eaten in such a fashion as to allow the skin to come into contact with the mouth infection might be conveyed. A good plan is to sterilise fruit by placing it for a few seconds in boiling water. Fresh salad is a dangerous article of diet for the ingredients such as lettuce are often washed and that in dirty water before they come to Calcutta and there is the source of infection again. One outbreak among Europeans, who went on a river trip was traced almost definitely to the salad supplied. And in this connection the curious fact was noticed that one who had been of the

\* party and had eaten no salad after hearing of the illness of others who were present was seized with symptoms resembling those of cholera. He had not, however, the disease and he recovered almost at once. An incident which did not occur in Calcutta may be recalled. It was that in which an officers' mess was attacked by cholera and an expert investigation showed that the cloth a pudding had been made in had been washed in a stream which was infected, and, the pudding containing gelatine, the bacilli had found that medium an excellent "culture" and increased in an hour or so to considerable numbers. In each of the above cases the infection came through water and it may be taken as a general rule that cholera is carried primarily by water and from that element affects other foods, although other instances can occur. As an example of how water may become infected there is the well-remembered case of the cholera-carrier, who infected samples of Calcutta water. It was found some years ago that certain samples of water contained cholera oocysts, but that water taken from the supply did not. On investigation it appeared that the chirassi who took the sample was a cholera-carrier, that he had the bacilli but they did not affect his own health. Yet he transferred them to the samples of water he took. It must here be said, however, that the Calcutta water which is tested with great frequency and care, has proved to be perfectly free from cholera bacilli and there is absolutely no danger from the use of filtered water.

#### THE MILK PROBLEM

But unhappily filtered water is not always available for use in dealing with food in the districts whence much of Calcutta's food comes. Thus there is every reason for the exercise of the greatest care. Milk is one of the most

prolific sources of danger, for in addition to milk in itself being very susceptible to contamination, there is so much adulteration that the danger from it is greatly increased. Every effort is made by the Corporation's Food Inspectors to see that the milk will pass muster but it is impossible to sample all that arrives. In any case examination with a lactometer is no guarantee against infection. The lactometer gives only the percentage of fat and other solids in the milk and thus affords some indication of the amount to which it has been adulterated if adulteration has taken place. But even then the inspector can be misled, for buffalo's milk, skimmed and watered, will pass as cow's milk of good quality. If dirty water has been used for purposes of adulteration there is any amount of danger from infection and even boiling does not kill all bacilli—although it accounts for the majority. The only way in which milk can be rendered perfectly innocuous is by sterilisation—which consists of keeping the milk at a certain temperature for a certain length of time. Corporation officials while they make every effort to keep the milk supply safe are so far without the means of fully safeguarding the public. What is wanted properly to safeguard the supply is control at the railway stations and markets while a bacteriological examination should be combined with a chemical examination. Eventually a laboratory is to be erected in connection with the New Market which will bring about much improvement in the milk-supply. But even then the problem is not solved. For instance, it was discovered that one case of cholera in a European was due to eating tinned cream, put up in India. It is known that the whole of the appointments of the establishment where the cream is put up are clean and reliable but that outside milk is relied upon. Obviously the outside milk had been infected with the disease. Butter may also be contaminated. Thus what is necessary is a municipal



dairy farm where every operation as regards dairy supplies is under perpetual inspection and every precaution is taken. The sooner Calcutta can arrive at this ideal the better. In the meantime all possible is being done but under obvious difficulties. And at the moment it is best to take one's milk from a reliable source.

#### SOME SAFEGUARDS.

Dr. Lubeck has drawn up a few simple precautionary measures to be observed. Here they are :

(1) Don't eat or drink anything which has not been recently cooked or boiled. Avoid stale food of every description.

(2) Boil milk and water before consumption.

(3) Do not eat raw vegetables, e. g., salads ; or over-ripe fruit. All vegetables should be thoroughly boiled before consumption. Fruit can be sterilized by placing it for a few seconds in boiling water.

(4) Avoid eating sweetmeats and other food exposed for sale in shops which are not protected against flies.

(5) As flies may carry infection they should be excluded from the kitchen and from cupboards where food is kept. Dust should also be excluded. Daily kitchen supervision of a thorough and searching character is recommended.

(6) Remove kitchen, stable, cowshed and other refuse about the premises promptly. Cleanliness in this respect will tend to keep away flies, as it will remove their favourite breeding places.

(7) Pay particular attention to the cleanliness of the servants' quarters, latrines and drains, etc., and use disinfectant solutions (phenyle or Hycol), freely.

(8) Old earthenware receptacles for drinking water should where practicable be replaced by new ones. All

such receptacles should be scrubbed and thoroughly cleaned every day before refilling with boiled water.

(9) Care should be taken to satisfy oneself that ice-cream and drinks are of acknowledged best quality before consumption.

Dr. Lubeck also adds instructions in case of the disease breaking out in a house, one of the important portions of which is to inform the Health Department at once, so that the spread of infection may be prevented. Free treatment on modern methods is given to the poor in their own houses on application to the District Health Officers at the following addresses.— District No. I, 79, Cornwallis Street; District No. II, 22, Mirzapore Street; District No. III, Central Municipal Buildings, 5, Corporation Street; District No. IV, 11, Belvedere Road.

\* It has been said lately that the hospital accommodation for cholera is inadequate. That is hardly correct. The beds available are as follows—

	Indians.	Europeans.
Campbell Hospital	. 29	... 0
P. G. H. *	. 0	... 5
Medical College	. 14	... 6
Sambu Nath Pundit	. 6	.. 0
Mayo Hospital	. 6	... 0

In normal times that is sufficient, but an epidemic naturally increases the demand for beds. Whether the present epidemic has shown the need for a greater establishment of beds is a matter for the authorities. Cases are removed to hospital in a special infectious diseases ambulance. It is impossible to obtain the number of European cases but it is known that several deaths have occurred from cholera. An exact return is not available as all doctors do not report cases of infectious diseases although there are rules that order such

a report to be made. It is felt that greater attention to this regulation would be advisable.

—*The Englishman.*

## OPTIMISM VERSUS PESSIMISM IN PRESENT-DAY HOMEOPATHY.

Benjamin C. Woodbury, Jr., M. D., Honolulu Hawaii.

It is not very many years since the term "therapeutic nihilism" was current in medical literature, and even today we find occasional mention of it. Yet for long it dominated the mind and soul of so-called scientific medicine. In the maddening dilemma following the *ex cathedra* statements of the leading medical authorities relative to this great bugaboo, there followed various attempts to bolster up the waning interest in internal medication, but with only partial success.

Meantime there has developed a corresponding tendency in the ranks of homeopaths, till at the present time it may truly be said that there exists a well defined pessimism among the majority of so-called homeopathic practitioners regarding the curative properties of the very remedies upon which, in the palmy days of his medical tutelage, the student of a few years since was wont to place his confidence in time of stress. Where has vanished the old-time optimism of our fathers; where is that hopeful faith with which every good homeopathic practitioner entered the bedroom of the sick? Surely, the much-vaunted methods of scientific medicine have done little to increase that faith: nay, the present era in medical

practice has given way to fear instead of faith, till we have become almost hopelessly inoculated with the cankerous decay of pessimism. This philosophy, we might almost say, is more grave and less hopeful in outlook than that of therapeutic nihilism of which we have just spoken ; for the nihilist, like the agnostic, knows and admits his shortcomings ; the pessimist, on the other hand, undervalues even the evidences of facts and therapeutic verities. What can we do to mitigate such an apparently hopeless situation ?

The present world-crisis has done much to bring to public notice the status of homeopathy as a distinctive school of medicine ; yet homeopathy has thus far received no official sanction as a method of therapeutics. It is true that the homeopathic profession has been officially recognized as an organized branch of general medicine, and thus appealed to ; and loyal indeed has been that response.

*(To be continued).*

—*The North American Journal of Homeopathy.*

## Correspondence

Noapara, Faridpore.

19. 7. 19.

To

The Editor, Indian Homeopathic Review.

Dear Sir,

I beg most respectfully and humbly to request you to publish the following lines in your esteemed paper and oblige.

*Your obedient servant,*

Bejoy Chandra Ghosh.

### CHOLERA.

Cholera is an acute specific and infectious disease caused by a special organism characterised by copious vomiting and purging of watery fluid, cramps in the limbs, suppression of urine, rapid prostration and a tendency to collapse.

*History of cholera.* Bengal and the delta of the Ganges are the homes of cholera. It was a well known disease of the ancient Hindus.

*How cholera spreads.* Cholera spreads along the lines of travelling routes e. g. In 1838 there was a great epidemic of cholera in Europe. History tells us that this epidemic was preceded by a spread of cholera epidemic in Afganistan. From Afganistan cholera travelled to Persia, thence to central Asia, Russia and through Medeteranian sea to the rest of Europe, then across the Atlantic ocean to America and India. Moultan and Pondichery enjoy immunity, also the Andaman Islands.

Long before the discovery of the Cholera bacillus, Cholera was supposed to be due to certain poison in the intestine.

Prof. Macnamara suggested for the first time that the

micro-organism is carried into the alimentary canal through the mouth.

Some again believe that the spread of the poison has some relation to soil and season because cholera in the rainy season is less poisonous than cholera in winter.

Pettencoffer traced the outbreak of the epidemics to changes in the level of sub-soil water. The months during the year in which cholera epidemic occurs in Calcutta are March, April and May. During these months sub-soil is at its lowest level, atmospheric pressure is lowest and the thermometer highest. And he traced that in July, August and September sub-soil water is high. Barometer pressure is high, temperature low.

These clearly show us that the out-break of cholera-epidemic has some relation to soil and season.

Cholera is an water-born disease e. g. In Hamburg the drinking water is supplied by the river Elbe. Any how this water became infected. Filtered water was used in one part of the town and another portion used unfiltered water. Among those who used the filtered water, mortality was low and those who used unfiltered water, mortality was grave.

In the year 1884, Professor Kotch discovered a "comma"-shaped bacillus and in the following year he came to Calcutta and traced certain comma-shaped bacillus in the cholera stool and he proved that these comma-shaped bacilli were the true poison of cholera.

Dr. D. D. Cunningham brought forward certain objections to Kotch's theory. He said that sixteen different varieties of comma-shaped bacilli have been demonstrated in the cholera stools and he also objected secondly that he found such "comma"-shaped bacilli in the stool of healthy persons.

Dr. Pettencoffer seconded Dr. Cunningham's theory and an altercation ensued between Kotch and Pettencoffer and Cunningham. During the altercation Pettencoffer swallowed

comma-shaped bacilli taken from cholera stools and history tells us that Pettencoffer is still alive.

Prof. Kotch brought forward a big explanation why Bettencoffer did not get cholera.

He says that "these healthy subjects are 'potential cholera cases' and they lack certain condition necessary for the growth and developments of cholera bacillus in the system." These conditions are called the predisposing causes.

*Predisposing Causes.*

1. Irritation of the alimentary canal e. g. Gastritis, enteritis, chills, fatigue.
2. Bad, insufficient or unsuitable food.
3. General insanitary surroundings.
4. General health and the resisting power of the individuals.

In order to corroborate these facts he brought forward a very important example

Take the case of Pilgrims. These pilgrims furnish these conditions necessary for the growth and development of cholera bacillus in the system. Because :—

1. They are wanderers.
2. They suffer various disadvantages.
3. They live exposed
4. They are badly fed.
5. They are crowded together.
6. They do not take proper care of their excretion.

Hence the cholera mortality is high among the Pilgrims. Therefore to produce cholera three factors are necessary :—

1. Individual predisposition.
2. Entrance of cholera bacilli in the system.
3. Condition of soil and season.

(To be continued.)

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

"The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

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XXVIII. ]

SEPTEMBER, 1919.

[ No. 9.

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## ALBUMINURIA.

Sir William Osler has very justly remarked that "the presence of albumin in the urine, formerly regarded as indicative of Bright's Disease, is now recognized as occurring under many circumstances without the existence of serious organic change in the kidney." I would go a step further and say that both acute and chronic albuminuria, even where we find granular and hyaline casts, hamaturia and persistent dropsy, we are able to cure with the indicated remedy and a regulated diet.

I had one case, that of a boy of six, who had been suffering from albuminuria with dropsy with marked periodical exacerbations for over a year. This boy was under my treatment for a year and then he recovered completely. I put him on rice diet and gave



him Sulph, Calc. ars, Apocynum and Apis during the course of the treatment. He had an enlarged liver and Calc. ars did him the most good.

The next case was also of a boy of the same age. But I could not report about his cure because his people got impatient and changed treatment. I heard that another homeopath had been called, who said that I had made a mistake in giving him rice diet. Barley, milk and rice, I think, are the best food for these cases. Salt-free diet has been recommended. I have seen many cases where the dropsy disappeared quickly under such diet, but there is danger of the heart becoming deranged from this and anæmia setting in.

My third case was that of a young college student, who had periodical attacks of violent hamaturia with albuminuria with hyaline and granular casts in abundance. I stopped the hemorrhage effectively with Phosph and Calc. carb and he has progressed very satisfactorily. But I find that whenever he goes back to his studies he gets worse again. Lycopodium and Nux vom have done much for this young man for he is always flatulent and very constipated.

I cured another case of a young man some years ago where the albuminuria and dropsy appeared in the later stages of malaria. I gave him Natrum mur and Calc. ars in the beginning for he had an enormously enlarged spleen. But the remedy that did him the most good was Lycopodium in the 200th potency once a week. These cases require prolonged and careful

treatment and excellent results are obtained under homeopathic medication.

Diet should be carefully observed and chills, colds &c avoided. Meat and spirits should never be allowed.

J. N. M.

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## PRACTICE OF MEDICINE.

*(Continued from page 181, No. 8. Vol. XXVIII.)*

### NEURALGIA.

Magnesia Phos. is a good medicine and we often get very good result from it. Supra and infra orbital pain, better by warm application.

Mezerium—Neuralgia of the eyebrow, and after operation ; pain from 9 A. M. to 12 noon. Digging and pressing pain, after pain, numbness of parts, worse from warmth.

Pulsat—Tickling and drawing pain, worse in the evening and in a warm room, better in open air.

Rhustox—Tearing or burning pain. Restlessness &c.

Sanguinaria—All over the face, even in eyes, ears and neck. Burning and cutting pains.

Spigelia—Cutting and darting pains coming and going suddenly, palpitation, left side most affected, worse by touch and motion. After suppressed intermittent fever.

Sulphur—Intermittent pains, burning and cutting,

chronic cases. We cured many cases by Sulph high, frequently repeated.

Mercurius, Nux vom, Phosphor, Natrum m, Sepia, Thuja, Verbascum and Zincum may be useful.

#### SCIATICA. ISCHIAS.

Neuralgic pain in the sciatic nerve is called sciatica. Pain throughout the course of the nerve.

**Causes.** Almost unknown, Pressure of tumor, cold exposure, delivery by forceps and various diseases of the vertebral column.

**Symptoms.** Pain is the chief symptom. It arises from the nates and spreads to the knee and thence to the feet, always on the outer side of the limb. Pain from time to time, is worse by touch or movement.

**Treatment.** Medicine should be selected according to the symptoms and general condition of the patient.

Aconite—Pain is slight at first but gradually increases. Cutting, tearing or aching.

Argent nit—From hip to knee and very much like paralysis; emaciation of the affected part.

Arsenic—Periodic pains. Burning, worse at midnight, better by warm application.

Belladonna—Crying from intensity of pain. Feverish pain, aggravated by touch and movement.

Calcarea c—From exposure to cold air and water. Disease from spinal ailments.

Causticum—Tearing pains, more on the left side. Desire to move the limbs.

P. C. MAJUMDAR, M. D.

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## OPTIMISM VERSUS PESSIMISM IN PRESENT-DAY HOMEOPATHY.

*(Continued from page 190, No. 8, Vol. XXVIII).*

The supreme sacrifice of the homeopathist has been the full devotion with which he has laid upon the altar of democracy the possession of his therapeutic liberty. Enough cannot be said in favor of those loyal and fearless sons of Hahnemann, who have thus generously given their all, even to life itself, ungrudgingly and without a qualm. There are no "schools" in the United States Army. This has repeatedly been emphasized ; and when our homeopathic brethren have been granted commissions, they have been given them as physicians, not as homeopathic physicians. This is as it should be, truly. Nor can the generosity of these men be underrated or their service overlooked. It may be that thus and only thus can the salutary method of similars be given a new birth of freedom.

What can we do to arouse a new interest in homeopathic institutions ; how best can the students in our own therapeutic training camps be given an adequate conception of the method of choosing medicines according to the law of similars ? It may to some seem an impossibility. But is it insurmountable ? We believe not. Eventually, in our opinion, the best method of teaching homeopathy will be found to be post-graduate instruction.

The majority of our older institutions have already

incorporated adequate training in physiologic materia medica and therapeutics. This may in the end make for better and more efficient graduate students, but the homeopathic method can best be taught to graduate physicians who have knowledge and experience with both methods of practice. A body of instructors, thoroughly imbued with the spirit of homeopathic institutes and practice in post-graduate institutions or in post-graduate departments in our recognized colleges, could present homeopathy to the best possible advantage. It would, in fact, be an approach to the older preceptor system, which has undoubtedly never been surpassed for clear-cut and practical value to the prospective student of medicine. In fact, it has been said that the Harvard Medical School was in a large measure the result of a protest against the maintenance of undergraduate instruction come from under the old order. Hence originated likewise the long-stand-preceptor to student, so successful and lucrative had this system being prestige of medical instruction minus the honorarium, which the new order of paid instructors and professorships will undoubtedly in time supersede.

There is certainly no better way to learn homeopathy than to follow in the footsteps of a master of the art. It has been the writer's rare privilege to know a select few of such men, and it is to the inspiration of their example that he must confess allegiance, and profess his increasing devotion to the innate supremacy of true homeopathy over the many

therapeutic by-paths of the present era in therapeutics.

The true follower of Hahnemann sits at the feet of his master, and the prescience that was his, glimpsed yet afar off, and the spirit of the method become to him as almost living presence.

During the writer's brief sojourn in Hawaii it has been his privilege to follow in the practice of Dr. George J. Augur, a master homeopath, and his conviction of the wonderful therapeutic value of true homeopathy has not only been re-affirmed, but strengthened.

Let me present the following cases, which well exemplify the principles above enunciated :

*Case I.* Carolyn, aet. 9 years, was brought to the writer in December of 1916, suffering from a simple but troublesome complaint, namely, ringworm of the scalp. There were other vestiges of the eruption which had in part been suppressed by the application of iodine, upon the face, especially over the cheeks, around the chin, and across the bridge of the nose, but the most pronounced manifestation was upon the hairy scalp, where there were several areas of varying sizes, denuded of hair, and there was a good deal of dandruff, with itching and scaliness. Sepia was given in two potencies, as follows : Dec. 20, Sepia 1m ; Jan. 6th, Sac. lac. ; Jan. 24th, Sepia 1m ; Feb. 10, Sac. lac. ; March 10, Sepia 50m ; with complete relief of the condition ; the ringworm disappeared, and the scalp was restored to its former healthy and normal condition.

*Case II.* Miss M. L. consulted the writer on March 12, 1917, suffering from herpes zoster involving the left intercostal region. She had been suffering from pain, itching, and the

usual symptoms of this disorder for nearly a week, without promise of relief. She was given, upon indications, *Rhus tox.* 1m, a dose dry on the tongue, and *Sacch. lac.* powders. Four days later she was much relieved. One more powder of *Rhus tox.* was given, and she has since remained well.

It may be well to remember that Jahr recommends chiefly *Rhus* and *Graphites*, in this disorder, in the Pocket Repertory, and in his Forty Years' Practice he strongly advises the use of *Arsenicum* when the symptoms correspond. With these three remedies in proper dosage, the majority of cases of this painful disorder will be easily managed.

*Case III.* Miss R., aet. about 60 years, a very strict vegetarian, became ill in March, 1917, with inability to digest food, eructations after eating, constipation, and a train of symptoms attributable to profound auto-intoxication. Finally, after a few weeks this condition culminated in an acute gastric attack, with fever, vomiting, burning pains in the stomach, acrid vomitus, pyrosis, and extreme tenderness over the epigastrium, with soreness of the throat on swallowing and upon eructation. Several remedies suggested themselves but were given without relief. *Arsenicum* 30th, was then given and entirely removed the fever, vomiting, pain and pyrosis, and after consenting to take, for a time at least, a moderate amount of animal food (which was insisted upon by a consultant), this patient made sufficient progress to leave for San Francisco within three weeks. No definite diagnosis was reached in this case, but the clinical evidences pointed strongly to gastric ulcer.

*Case IV.* Mrs. J. M. W., aet. 80 years, developed acute lobar pneumonia in the upper portion of the right lung. There had been a pneumonia many years before and attacks of bronchitis about every year or every second year during a

long period, but the patient had no marked emphysema or other distressing conditions prior to this attack, aside from a pronounced debility due in part to her advanced years. Aconite was given in the early stages, but the fever did not diminish. Two days later it became very evident that there was probable involvement of the lung. At this time the patient presented an increasing area of consolidation in the affected portion, cough, with scanty, slightly blood-streaked sputum; rattling in chest, but almost no ability to expectorate; fever 102.8; pulse 110, slightly intermittent, moderate cyanosis of palms; restlessness and anguish. In consultation with Dr. Augur, antimonium tartaricum was decided upon, and it was given in the 200th potency, in water, one tea-spoonful once in two hours. Aside from a single dose of phosphorus at one time when there was great oppression and pain in the chest, this remedy carried the patient through to recovery. It was suspended when there was any marked improvement, and resumed upon aggravation of the symptoms, and during the crisis which occurred upon the fifth day.

The subsequent history of the case is that the patient got well enough to drive out daily, until one day, after a longer turn than usual, she developed an acute cystitis, which had been an old enemy at times in the past, and for which local application had been used. The remedy which gave decided relief and carried her to recovery in about three weeks' time was cantharis 30th. For a subsequent bronchial cough and a severe backache she was given kali carb. 200th, with complete relief. Since then there has been no other medicine. One interesting feature of the pneumonia involvement was that, after the beginning, when there were a few rust-colored sputa, there was absolutely no expectoration and but the slightest suggestion of a cough. The patient is well at the present time, and says she has not felt as well for more than a year.



*Case V.* Mrs. W. O. S., aet. 62. At the age of 25 years she suffered from an attack of phlegmasia alba dolens, after the birth of her third child. Since taking an overdose of quinin five years ago she has flowed periodically, a bright red flow worse from motion or exertion; this may not be associated with attacks of acute bronchitis, to which she has been subject once or twice a year for some time. It may be well to state that the patient experienced the change of life without any troublesome or alarming symptoms, and has during the present difficulty been carefully examined by several surgeons, but there has never been any evidence of malignancy. During an attack in May, 1917, associated with an acute bronchial invasion, patient had much flow, which was very much aggravated from motion, with soreness of chest and abdomen on coughing, and there was suffocative breathing on lying down or from exertion. She was given bryonia in the 30th, 200th and 1m potencies, in sequence, since which time, now a year and a half, there has been no bronchial attack, and the metrorrhagia has not returned. For a few remaining symptoms, chief among which was smarting on urinating and involuntary urination upon slight cough, or when sneezing, she was given causticum; and there have been some other remedies for intercurrent conditions, but the bronchitis and the flowing have not since returned. While bryonia seemed to be the direct similimum in this case, it is also one of the remedies having an antidotal relationship to the ill effects of quinin.

#### TWO CASES OF ADENITIS.

*Case VI.* A baby, aet. 17 months, developed an acute inflammatory gland in the post-cervical region, and when first seen, October, 1918, belladonna relieved the fever somewhat, also an associated dry heat of the skin, with restlessness and a peculiar twitching of the muscles and convulsive motion of

the spine on lying down, and when first falling asleep. The gland continued to increase in size, however, and the temperature kept high—102-103—until, on Nov. 6, mercury binioid in the third decimal potency was given, which was followed by relief of the fever, and slight relief of the tenderness, but there was difficulty in breathing on lying down, with coarse bronchial sounds, especially when lying on the left side, with difficult expiration. He was altogether the type described in the pathogenesis of bromine: fair skin, light hair, blue eyes, and there was the associated scrofulous, hard swelling of the gland. He was accordingly given four powders of bromium Cm on Nov. 12, and three days later was, as his grandmother stated it, astonishingly better. There was complete relief of the breathing, and the gland had decreased fully one-half in size. On Nov. 20 he received four more powders of the same remedy, and on Dec. 5, as there was a slight enlargement of the neck still remaining, the remedy was again repeated. There is every evidence at the present date that he will entirely recover. He was examined by Dr. W. G. Rogers, with reference to the condition of the nose, throat and aural cavities, with the report that it was a cervical involvement secondary to tonsillary infection. During the course of treatment, however, the condition of the tonsils has markedly improved.

The most interesting feature of this case was, as his grandmother put it, that prior to his illness the baby had a strong craving for salt and disliked sugar, and now the reverse is the case: he craves sweets, with complete aversion to salt. In fact, said she, "His whole nature seems changed."

*Case VII.* Mrs. W. had suffered for some months from indigestion of a peculiar kind which she described as the sense of a load at the pit of the stomach and which was temporarily relieved after eating, but aggravated when the stomach became

empty. After being given several remedies in vain for this condition, she was finally relieved for a short time by Natrum carb. 50m potency. (It may be well to remark parenthetically that the patient had been a sufferer for the greater part of her life from chronic headaches, manifesting a somewhat similar modality—namely, that she was always hungry during the headache and would feel like getting up at night and eating before the pain came on or during the attacks. She was given Psorinum 50m nearly a year ago and has had no headaches since).

On November 1, after riding in the wind, she developed fever, stiffness and soreness of the glands of the anterior lower cervical region, and an exacerbation of the stomach disturbance, with inability to digest even the simplest food. There was foul breath, coated tongue, great sensitiveness of the throat on swallowing or upon eructation, and complete inertia of the bowels, which had to be relieved by oil enemata. The temperature was generally normal in the morning, occasionally sub-normal or a little above. But at night it ranged from 102.4 or 102.6 to as high as 103.8 and the pulse rate was 90 to 105. Upon examination, a few isolated rales were found beneath the scapula on the right side of the chest; there was no evidence of coryza, but a persistent hacking cough, without expectoration.

After giving various remedies, chief of which was aconite, which would temporarily relieve the restlessness, she was given mercury biniodid, especially indicated by the glands being worse on the left side; by great sensitiveness to pressure; by night aggravation of all symptoms; by moist, large and flabby tongue, showing imprints of teeth. The pains in the neck were intense, with shooting into the ears, and especially extending to the inferior maxilla. There seemed to be general exacerbation on alternate days. The remedy

was given in the third decimal trituration in water, once in two hours, with the result that the fever was very soon relieved, the sensitiveness of the glands diminished and the temperature gradually became normal.

There was, however, with the cessation of the fever, a return of all the old stomach symptoms in renewed force, so that all food caused distress, and the patient was greatly reduced in weight and strength. Owing to the extreme emaciation, slight hacking cough which had persisted throughout the glandular involvement, with the persistence of the rales above mentioned, the chest was again carefully examined in consultation with Dr. Q. A. DeTuncq, and it was decided to have some tests made for a possible tubercular focus. Accordingly, radiographs of the chest were made by Dr. A. N. Sinclair of Honolulu, with negative results.

Nux vomica was being given at this time, as it had several times suggested itself in this case, but without the slightest benefit. It finally occurred to the writer to return to the last remedy that had benefited. She was given *Narum carb.*, this time in the sixth trituration in water, which gave almost immediate relief of the stomach symptoms. There was return of strength, appetite, and up to the present writing the patient has gained eight or ten pounds in weight, and looks better in every way. After giving the remedy for about ten days, as conditions warranted, a peculiar restlessness and uneasiness of the feet and legs developed (an old symptom), which occurred particularly at night, and was generally relieved by massage. This symptom is, of course, a so-called "keynote" of *Zincum*, but Kent also gives, under "restlessness of feet at night : *Cham.*, *Nat-c.*, *Puls.*, *Thuj.*, *zinc.*" Accordingly, the remedy was continued, but the potency was changed to the 50m, the first that had given relief, and she has continued to improve, and is now making an excellent recovery. Her

bowels are now moving normally, and she is digesting her food without discomfort. It is interesting to note that Clarke, in his Dictionary of Materia Medica, gives under this remedy: "Swelling and induration of glands." It also has a peculiar construction of the stomach, almost akin to that presented in the well-known condition of Plumbum, that of a sensation as though the abdomen were drawn inward to the spine. A symptom approaching this in similarity was also present in this case.

*Case VIII.* Mrs. J. S., aet. 57 years, had been a sufferer from epilepsy for many years until the climacteric was passed. This trouble dated from a fall received at the age of 15 years. During all this time she had suffered periodically from a peculiar melancholia, has at times found it almost impossible to contain herself, and has several times nearly lost her reason. She has had various remedies from different physicians, and about a year and a half ago, in California, a lumbar puncture was made, with temporary relief of the pressure symptoms. Her old conditions, however, soon returned, until upon her return to Honolulu, Dr. George J. Augur gave her Aurum met. in potency, which has been the one remedy that has always given relief. There has been in her case at times an almost uncontrollable desire to commit suicide, and when the condition is upon her, nothing looks right to her, even her own family cannot be tolerated by her. She has received in the past two months, in the absence of Dr. Augur, two prescriptions of this remedy in the 40m, with complete relief of her mental condition, at least temporarily.

The writer is not concerned in this paper with the explanation of the action of these subtile and invisible forces that are liberated or generated in comparatively inert substances, through the Hahnemannian process of trituration and dilution. That such potency is latent

within these so-called simple homeopathic remedies, only he can know who is sufficiently unprejudiced to investigate, and sufficiently enlightened to utilize.

- Surely, where one is willing to use remedies from the low potencies to the so-called high, as herein administered, he cannot be accused of prejudice, nor can he be criticised for failure to get reasonably satisfactory results from those potencies administered.
- What we most need in homeopathy today is a renewed faith in the efficacy of these dynamic agencies to heal the sick, administered upon the indications given us by the earlier followers of Hahnemann, reinforced wherever possible by the more scientific verifications of the present day. Our apparent therapeutic nihilism will then be dispelled for the clearer insight and fuller vision of the really direct and accurate healing power of drugs.

—*The North American Journal of Homeopathy.*

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### CONCERNING MALARIA.\*

THE *Indian Medical Gazette* for July, 1918, is a "Special Quinine and Malarial Number," containing four original articles—two on treatment, two on prophylaxis. Those who have followed the researches on malaria conducted in this country during the war well know that so far it has not been found possible to cure simple tertian malaria infections by Quinine used in any dose in any way, and that the fundamental

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\* From *The Lancet* with full acknowledgments.

fallacies underlying the pre-war text-book were traceable to a lack of adequate post-treatment observation period. Nor, so far, has *Salvarsan* proved any more effective, though its "specific" action is just as well marked as that of *Quinine*. How far these statements apply to malignant tertian malaria we cannot say, though the evidence is very clear that *Plasmodium falciparum* and *P. vivax* react differently to *Quinine* and *Salvarsan*, and it is consequently imperative that authors when they write of *Quinine* and malaria should state to what exactly they are referring. There is, so far as we are aware, no evidence on record proving that a first attack of any form of malaria is more readily cured than a relapse. Of the efficiency of intramuscular injections of *Quinine*, even in the strength of 1 g. in 2 c. c. of water, in simple tertian malaria there is not the slightest doubt. Those who still conduct academic discussions on the point should read the literature. The fact, if it be so, that *Quinine* (or what is supposed to be *Quinine*) has been found *in situ* post mortem cannot stand against the clinical and microscopical evidence. Ramsden's and Lipkin's work suggests that it may not be *Quinine* itself but a metabolite of *Quinine* that is the actual parasitocidal agent; and, further, there is evidence that muscle possesses this power of metabolising *Quinine*. The finding of "*Quinine*" *in situ* in muscle may be, in fact, the very reason that intramuscular injections are so successful—*viz.*, the muscle is exercising its metabolising function, a function which blood as compared with muscle

possesses to hardly any appreciable extent. These are speculations, however, and do not in the least touch the established fact that intramuscular injection of *Quinine*, even in fifty per cent. solution, is a good method of administering *Quinine* in simple tertian malaria. Captain W. Fletcher, R.A.M.C., expresses his belief "that '*Quinine* resistant' types of malaria are either extremely rare or non-existent." "A relapse," he says, "during adequate *Quinine* treatment ( defined above as twenty gr. or more every day ) is, to say the least, uncommon" ; but not only the records of such cases, in *simple tertian malaria*, but the frequency of their occurrence can be found in the literature for 1917. Major D. G. Marshall, I. M. S., has some instructive teaching on the matter. In *simple tertian malaria* very little result is to be expected from such a *Quinine* course. *Quinine* for the attack is a proved remedy, but no short road to a cure of *simple tertian malaria* by its means has hitherto been found. *Quinine* prophylaxis has not yet emerged from the ocean of contradictory statements that exist on the matter. There is only one method of putting an end to the confusion, and that is, to begin again, defining strictly the conditions of each experiment ; it has not been generally recognised hitherto, for instance, that prophylaxis of a non-infected population and the "prophylaxis" (so-called) of an already infected population are two distinct questions.

—The Homeopathic World.



## SANGUINARIA.

*(Continued from page 144, No. 6, Vol. XXVIII).*

Early cases whom sanguinaria suits generally do well on sanatorium treatment. Damp weather distresses them but the open air is often liked, though the change from warm to cold air may start the cough. They do not as a rule take kindly to the heavy feeding of sanatoria, which is, however, not nearly so much insisted on as formerly. As will be seen presently, gastric and abdominal symptoms are noteworthy in the pathogenesis of sanguinaria.

Besides acute and subacute tuberculosis, sanguinaria has a value in some cases of pneumonia. Like chelidonium it affects the right side most. The characteristic cough of this remedy is frequently met with in pneumonia and the burning sensation may give an additional hint. The symptom, "Empty eructations after coughing," is said to be a keynote if it should occur. The "rightsidedness" of sanguinaria should be remembered in tuberculosis also.

The alimentary canal in its upper part is considerably affected by this drug. The main symptoms are gastric and hepatic, and with them is generally associated a headache of a kind to be presently described. The chief local symptoms of dyspepsia are vomiting, acrid and burning eructations, burning pain in the hypogastrium. The tongue is seldom heavily coated, it may be red and generally burns as does also the pharynx. Nausea is not much relieved by vomiting;

the vomit is sour, bitter and acrid and frequently contains much bile. The catarrh extends to the duodenum and the secretion of bile appears to be increased. At the beginning of a dyspeptic attack such as suggests sanguinaria, most of the bile is vomited, but later it seems to follow the normal course and produces a profuse bilious diarrhœa. The lower bowel is little affected directly by the drug. Attacks of this kind are often brought on by indiscretions in diet. They suggest an irritated rather than an inflamed gastroduodenal mucous membrane and a considerable disturbance in the hepatic functions. The body attempts to get rid of material that seems useless or harmful to it, and the vomiting and diarrhœa ensue. Frequently at some stage in the attack there is a sinking empty abdominal sensation that is not hunger. Indeed, there is often aversion from sight or smell of food as with colchicum, but the patient may easily take to alcoholic stimulants to combat the "sinking," and sanguinaria has a real place in the treatment of dyspepsia of drinkers.

During the gastric attack comes nearly always the headache. Attack and headache are frequently periodic, as often as every week even. In women the menstrual period is apt to be associated with a severe sick headache. The pain in the head usually precedes the gastric symptoms. It begins in the morning and goes on all day. Movement aggravates as much as when bryonia is to be thought of, and strong sensory stimuli are hardly endured; sensitive-

ness of the skin is marked. Above the right eye is a very characteristic spot of maximum intensity, and the pain often begins in the occiput and comes over the head to settle there. Sleep relieves the patient. .

Homeopaths naturally look at symptom complexes as entities whose details are interdependent, not arbitrary, and the gastric and hepatic and head symptoms of sanguinaria are to be considered in relation to the respiratory effects of the drug already mentioned. Whenever there is faulty metabolism and periodical accumulation of waste products and violent attempts at elimination (and in some such way we have to read the sanguinaria picture in its gastric aspect), other mucous surfaces are apt to be irritated and any infection of them to become chronic. Similarly toxins of respiratory diseases may react on metabolism ; the dyspepsia of early phthisis is notorious and indications for sanguinaria in that disease can be looked for in the abdominal as well as in the chest symptomatology.

Further, these cases of faulty elimination almost invariably display pain symptoms affecting nerves and muscles and joints. With sanguinaria, the joints escape as a rule, but pains of a neuralgic character, severe and tearing, are frequently met with, also pain and stiffness and hampered movement of groups of muscles, especially about the neck and shoulders. Stiff neck, pain in the deltoid region (right-sided probably), inability to use the arm freely, pains extending up into the head, all these symptoms are to

be noted in those who need sanguinaria. The pains are severe, aggravated by movement and at night ; the last two symptoms help to distinguish sanguinaria from ferrum for these complaints,

It will be seen that the range of action of the drug is considerable and its intensity also, but as has already been said, it has not a long lasting effect or one of a profound and searching quality. In the earlier stages of similar complaints it is curative ; in later stages its palliative action may be invaluable when more deeply acting remedies might be dangerous. It has been used and praised in all potencies, and like most of the drugs of shallower action even high potencies can be repeated with benefit without very prolonged intervals between the doses. But here, as always, the wise prescriber follows the rule of taking any improvement in the patient's condition as an indication to stay his hand. Sanguinaria should be associated in the mind with chelidonium and opium, but it seems to antidote the latter.

—*The British Homeopathic Journal.*

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## A SQUILLA CASE.

Dr. X., homeopathic woman physician, presented herself for treatment, complaining of a dry cough of three months' duration. *China* and *Phosphorus* had modified the condition somewhat, but had failed to relieve it. One or two other remedies had been of no avail.

Present condition : Cough < from deep inspiration ; < from tobacco smoke ; < when anyone enters room.

No modalities as to time, position, temperature or other circumstances. Several remedies came to mind, among others, *Ambra grisea* and *Mentha piperita*. The latter has a marked aggravation of its cough from smoke, especially tobacco smoke. Accordingly it was chosen and given in the twelfth potency, but with no relief. Evidently some element in the case had been overlooked or not brought out. A re-examination, therefore, established the following facts :

Cough now spasmodic, gagging, almost like whooping cough : Cough < coming into the house ; < when anyone enters room ; < deep inspiration ; < tobacco smoke ; < talking.

During cough—*spurting of urine* ; so much so, that she is obliged to wear a napkin.

Here, then, we had stumbled across the open sesame to the case. *Squilla* 900 F. was given with, to quote the patient's own words, *wonderful immediate effect*.

The symptoms "cough < when anyone enters room" and "cough < from tobacco smoke," are not found in the pathogenesis of *Squilla*. They may, therefore, be regarded tentatively at least as possible clinical symptoms of value. Further confirmation will be required to establish their title. The symptom, "involuntary spurting of urine during cough," is

found under numerous remedies ; but characteristically under *Causticum*, *Natrum mur.*, *Squilla* and *Pulsatilla*.

Several nose and throat men had examined and swabbed this patient's throat without avail.

*In order to cure gently, quickly, unfailingly and permanently, select for every case of disease a medicine capable of calling forth by itself an affection similar to that which it is intended to cure.— Hahnemann—Introduction to The Organon.*

## LONDON HOMEOPATHIC HOSPITAL.

The following letter was addressed to the Governors of the London Homeopathic Hospital and we publish it here because it shows what good work the Hospital did for the Navy during the War.—Ed, I. H. R.

From Sir WILLIAM NORMAN, K. C. B.,

Director-General of Medical Services.

Admiralty, April 2nd, 1919.

Sir,

I very much regret that owing to a previous engagement, I will not be able to attend your annual meeting.

Will you please be good enough to express my thanks to the Governors of the Hospital for the care and treatment bestowed on sick and wounded officers and men of the Royal Navy, whom they have had under their charge during the period of the war ?

On the conclusion of peace negotiations I am forwarding the Lords Commissioners of the Admiralty

a report of the good work done by the medical and nursing staff of your Hospital pointing out how much their services have been valued and appreciated by the numerous patients that have been under treatment, and I feel sure that their Lordships will forward you a letter of recognition and thanks for the great work done by this Hospital.

I am, Sir,

Your obedient servant,

W. H. NORMAN,

*Director-General.*

—*The Homeopathic World.*

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EDITED BY

P. C. MAJUMDAR, M. D., & J. N. MAJUMDAR, M. D.

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2. The development of Homeopathic Practice of Medicine and Materia Medica, especially the 'proving' and clinical application of indigenous drugs of the country.
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knowledge of their employment constitute medicine.

—HAHNEMANN.

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XXVIII. ]

OCTOBER, 1919.

[ NO. 10.

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## THE CALCUTTA HOMEOPATHIC HOSPITAL.

We are very happy to be able to announce that one of our patients Babu Siddheswar Gorai has very generously offered to build an upper story to the Calcutta Homeopathic Hospital, which had hitherto been able to accommodate only a certain number of patients both male and female in the general wards. This magnificent gift will enable the hospital authorities to set apart a number of rooms for a better class of patients who often come to Calcutta for homeopathic treatment but who have hitherto been put to much difficulty and expense for the lack of this sort of accommodation. Last year Mrs. P. C. Majumdar had a suit of rooms built for the lecture halls for the students. In this way we go on increasing the accommodation of the hospital. We hope in the near future to have a fairly well equipped hospital and college for homeopathy.



in India. The hospital authorities desire to express their gratitude to Babu Siddheswar Gorai for this act of disinterested charity and it is hoped that many others would 'emulate' the example of this noble gentleman. It is worth mentioning here that this is not the first instance that Siddheswar Babu has helped the cause of homeopathy. He has already established two homeopathic charitable dispensaries in Calcutta which are doing much good work for the relief of the suffering of the needy poor of the town. These institutions are thoroughly equipped and properly endowed and are under the supervision of Dr. J. N. Majumdar of this city.

### NEPHRALGIA—RENAL COLIC.

This is a most painful and annoying disease, and often tires the patient and the physician. This is very well managed by the indicated homeopathic medicines. Allopaths always prescribe anodyne medicines as morphia, chloral hydrate &c. but they cause the most suffering and their after effects are injurious. We know this from personal experience. A friend of mine, a homeopathic physician, got this disease and in the intensity of pain took morphine &c. I told him not to do so but he said he could not bear the pain and he was very bad for the next two days. I had a patient next door to the doctor who was under my care. He got relief as I gave him the medicine (homeopathic of

course) and was hale and hearty the next day. Generally I gave him Calc c, 200 every hour and he was put to sleep and ultimately cured. My friend suffered greatly and was not cured till he depended upon homeopathic medicines.

I will give here some homeopathic medicines with proper indications for this painful disease and expect every follower of Hahnemann to select the proper remedy to cure the case.

During the pain you must first think of Calc c, Belladonna, Cannabis ind, Lycopod, Nux vom, Pulsat, Sarsaparilla, Ocimum can, Berberis.

Calc c.—Its general characteristics must be studied. "Before urination burning; during urination burning, cutting and soreness with passage of mucus and blood; after urination renewed desire with burning, glands itching." All kinds of gravel and urinary calculi. When the pain is unbearable give 200 one dose every hour or at even shorter intervals.

Belladonna is of great use during the pain. Spasmodic crampy pains from ureter to the bladder, pains come and go quickly, dark red face &c. Dr. Carlton says "Belladonna has never failed to relieve quickly for me, in similar cases, even when the concretions were so large that they distended the ureters. The similar medicine is as much superior to the benumbing drug as light is to darkness."

Berberis—Another very efficacious remedy for renal colic. "In the lumbar and renal regions a pressing, straining, shooting or bruising pain extending to

the thigh, with stiffness, numbness and sensations of warmth, which prevents raising the body and rising up. Tearing and pulsating pain in the right kidney. Cutting pain from left kidney to the bladder, urethra and penis. Symptoms are worse on stooping ; more when sitting or lying than in standing. Burning, scanty urine.

### I.

A middle aged gentleman, plethoric and dyspeptic, suffering from colic and flatulence often, suddenly called me one evening and on my arrival I found him in utter agony from pain in the right kidney region. He was advised to take injection of morphia which was denied. Burning, sticking and gnawing pain ; urine scanty and bloody, passing a few drops very frequently. Pain is worse from motion, better by rest. Often the pain shoots down to the thigh and penis. Sometimes vomiting of bile.

As usual I gave Calc c 200 every half an hour in water. No relief. I waited but the patient was frantic with agony. Three doses had been given without any effect, and studying I found most of the symptoms belong to Berberis which was given in the 6x potency every half an hour and the relief was instantaneous. In an hour's time he was put to sleep and I came away. I made a mistake in routine prescription of Calc c in this case. In homeopathy routine medication has no place. Every case must be thoroughly studied and prescribed for.

*Cannabis indica*—I have no experience with this medicine. Constant dull pain in the region of kidney and glans penis. Burning in urination.

The next important remedy but very seldom used is *Ocimum canum*. It is indicated by the following symptoms :—

Renal colic on the right side, violent vomiting of bile or other materials, acids &c. Red urine with brick-dust sediment.

## II

A young allopathic doctor had severe pain in the right side of the kidney and I was called in a hurry. I found him twist about, scream and groan; very restless. He said to me that in homeopathy there are good medicines for renal colic, so I called you. Urine was examined previously as he had several other attacks, containing uric acid and urates. I tried two or three medicines without effect. Pain increased and I could not leave him. At last I gave him *Ocimum can* 3x every half an hour. After two doses he perceived much relief and slept in an hour when I left him. He confessed that his morphines and anodynes could not give him so nice and prompt a relief.

*Lycopodium* is one of the best remedies for renal troubles. It is very much abused. Renal colic specially on the right side. Gravel, vesical calculi, small round and rough with hematuria. Passes urine after eating, mentally depressed and physically weak, small red sand in the urine.

## III

A young man, dyspeptic, suffered often from colic and flatulence, had acidity and heart burn in the afternoon. Bowels regularly constipated. He came under my treatment for a severe renal colic one evening. Pains from right kidney to the left, much loud rumbling but could not pass any urine. Urine burning, scanty, frequent, of high color with' red sediment. I gave him one dose of Lycopod 30 every ten minutes till pains mitigated. My next visit was two hours after, no effect. Pains were rather aggravated and urine almost suppressed. I gave him a dose of Lycopod cm., a few globules dissolved in water. In half an hour he got so much relief that he slept soundly.

Nux vom is also very useful in this disease, but it is also much abused. Pain extending to the high and genitals, worse on the right side. Very irritable; previous drugging, drinking too much tea, coffee and spirits. Irregular and sedentary living.

## IV

This case was under Dr. E. Carlton of New York City. "A middle aged lady whose early life was arduous and active, was brought into easy circumstance by marriage. One early morning I was called. Patient lying on her back in bed bountifully covered and fearful of cold air; irritable, sensitive; suffering greatly with pain in the right kidney and along the line of the right ureter to bladder and down the right thigh. Nausea and vomiting were occasional. Nux vom 200

in water was given first every five minutes, next every ten minutes and so on, as improvement advanced and brought speedy relief. The urine was saved and examined and found to contain numerous small calculi.

Sarsaparilla—I have cured some cases of bad renal colic and gravel with this remedy. Attacks of most excruciating pain, renal colic, passage of gravel stone in the bladder, hematuria. Frequent burning and urging in making water.

#### V.

An elderly man in College Street came under my care for severe pain in the kidney. Pain was very great in the neck of the bladder and also in the right kidney region. When he stands, passes urine more freely; frequent desire for stools when no urine passed. He suffered long from acidity and had gonorrhœa which was treated allopathically. Nux vom and Lycopod. were tried without benefit.

Sarsaparilla 3x every hour gave him prompt relief. I treated him for some time for acidity and dyspepsia and he was permanently cured.

P. C. MAJUMDAR.

## THE SINGLE REMEDY IN THE TREATMENT OF DISEASE.

By Eli G Jones, M. D., Buffalo, N. Y.

When a remedy is *definitely* indicated, if we prescribe it we may expect good results. This does away with all guess work and uncertainty. If your patient has the right remedy, the one that is *clearly* indicated, he will begin to feel better from the *start*. To be a *good* prescriber is to *know* materia medica. When a patient complains of a *deep-seated* pain in the *small* of the back it indicates *one* remedy, Tr. Berberis Vulgaris 5 drops every two hours. In a case of dyspepsia or indigestion, you may have a patient complain of a sensation of *pressure* as of a load, and *fullness* in the stomach generally with constipation. This indicates one remedy, Kali Sulph., 3d X, three tablets every two hours.

To cure a case of asthma, where the patient is *worse* in *damp* weather, give Natrum Sulph., 6th X, three tablets every two hours. I have known cases of asthma of 30 years' standing *permanently* cured by the above remedy. In a case of anemia or a case of *weak* heart, we have two remedies that can be depended on to *cure* such patients. Give Ferrum 3d X, three tablets every three hours, in alternation with Digitalin 3d X, three tablets every three hours. The above has been my treatment for the most *obstinate* cases of anemia and *weak* heart, for many years. When you see a sick person, anemic face, eyes *blood-*

*shot, hurried* breathing, *red* tongue, pulse *full and soft*, it calls for one remedy, Ferri Phos. 3d X, ten grains in a cup of hot water. Give a teaspoonful every 15 minutes in acute cases. A patient complains of a *roaring* sound in the ears that drives her nearly frantic. We may think of all the remedies that are "good for" *roaring* in the ears, but when we put our fingers on the wrist of the patient we find a *tension* to the *cords* of the wrist, also a feeling of *tension* and *irritability* to the pulse of *both* wrists. This shows us that the patient has "nerve tension." The nervous system is "keyed up" to the highest point and it indicates one remedy, Magnesia Phos. 3d X, three tablets every two hours in a teaspoonful of hot water, until the nerve tension is *relieved*. Then give Causticum 3d X, three tablets every three hours, for the roaring in the ears. *No* remedy would have helped the noises in the ears until the *nerve tension* had been *relieved*.

Very many patients drift out of the doctor's care to some *other* physician, simply because he doesn't know *how* to read the pulse, to learn the real condition of the sick person. When we know how to read the face, eye, pulse and tongue, it enables us to get right at the *real* condition of the patient and to find the *indicated* remedy. If you see a person at or near the middle age, taking on flesh pretty fast, with *shortness* of breath when walking or climbing the stairs, read the pulse and you will most always find an *intermission* of the pulse every third or fourth beat. This means



engorgement or enlargement of the liver or spleen. You will do well to examine the liver and spleen. Then give whichever remedy seems indicated by other symptoms, either *Chelidonium*, *Ceananthus* or *Carduus*. In a week or ten days (if you have selected the right remedy) read the pulse again, and if you find the intermission to the pulse further apart, it shows that the system is responding to the curative effects of your remedy, and that the enlargement of the organ is growing *smaller*.

I was asked by a physician to prescribe for a lady patient of his. She had a profuse *yellow* leucorrhœa, *swelling* and *excoriation* of the inside of her thighs. I prescribed *Graphites* 6th X, three tablets every three hours, because it was the remedy *indicated* in her case, and the remedy cured her.

In an *obstinate* case of chronic eczema that had been the rounds of the doctors, patient has very red face, as if she had been standing over a hot fire, *itching* over the whole body. It indicated one remedy, *Hepar Sulph.* 6th X, three tablets three times a day. Then have her take a bath twice a week of a pound Epsom Salts added to the usual quantity of warm water in the bath tub. Don't use any soap. This is the *best* medicated bath for all diseases. For a simple sore throat there is no better internal remedy than *Kali Mur.* 3d X. three tablets every two hours.

An old doctor complains of *soreness* of the walls of the chest, a *burning* sensation under the sternum, it *hurts* him to cough, sneeze. or, to move the arms.

The above symptoms indicate one remedy, Fr. Senega 3d X, 10 drops every two hours.

1331 Main St.

—*The North American Journal of Homoeopathy.*

## Notes.

*Colchicum*—It is indicated in gout. Considerable prostration with nightly aggravation. Urine loaded and frequent. Bowels loose.

*Abrotanum* is very useful in marasmas of children. Child cannot take his nourishment well. Diarrhœa and muscular atrophy. Old wrinkled look, large head and open fontanel. Also Calc c, Silicia and Sulph.

*Calc. fluor.*—Useful in fistula in ano. Cured numbers of cases with this remedy. Constitutional symptoms should be looked for. In lachrymal fistula it is the remedy; considerable watering of the eye, secretion of pus and mucus. Digestive derangement.

*Sambucus* is indicated in the very beginning of whooping cough. Child is suffocated after sleep at night. Much sneezing, running of the eyes and nose and considerable cough.

*Carbolic acid* is indicated in diphtheria when the pulse becomes weak, prostration extreme, pale face and extensive formation of membrane. When putrefaction commences it is a sovereign remedy.

—*The North American Journal of Homoeopathy.*

## THE PHYSICIAN'S DUTY IN THE ANTI-TUBERCULOSIS CAMPAIGN.

HERBERT F. GAMMONS, M.D., Deerwood, Minnesota.

In the past the general practitioner as a rule has not realized his responsibilities in the anti-tuberculosis campaign. For instance, he has not been on the watch for cases of tuberculosis in his practice or rather has not considered every case of sickness as possibly of tuberculous origin. Furthermore, if he has made a diagnosis of tuberculous disease and instituted the usual treatment of rest, fresh air, and good nourishing food, he has too often stopped there, without thinking of the health of those who come in contact with the tuberculous patient. He allows the disease to develop in these contacts so that when they show signs of tuberculous infection they are already pretty well advanced in the disease.

The general practitioner must play a large part in eradicating tuberculosis or in decreasing the morbidity and mortality caused by it. He can do this by instructing his tuberculous patients to cover their mouths when they cough and sneeze, and to burn the material used for this purpose; to expectorate into sputum cups that are kept covered, so that flies cannot get into them and serve as carriers of the bacilli; and to sterilize dishes and eating utensils by boiling.

In addition, he should seek out those persons who have been in contact with his tuberculous cases and persuade them to be examined not once but every few months, even though they feel well, and more often if they have any subjective symptoms.

It is generally conceded that many of the cases that are found by the general practitioner have been expectorating tuberculosis bacilli for many years and that they have infected many people during that time. I am in the habit of insisting

upon examination of the families of tuberculous patients and of those friends and acquaintances with whom they have closely associated. In almost every case the patients and their relatives are only too glad to co-operate, and invariably one or more of the contacts are found to be infected.

It is when the disease in these contacts is in the inflammatory stage and there has not yet been any ulceration, that we can effect a cure ; but in the cases that are diagnosed after they show ulceration, the best that we can hope for is quiescence or arrest of the disease ; although with certain changes in the mode of living even these open cases can be assured a long natural life. Unfortunately, a large majority of them do not have the necessary will power and determination to make these changes, and consequently we see many relapses in this type.

While reviewing a large number of statistics, I paid special attention to the length of time that had elapsed between the period of contact with a tuberculous person and the first outward sign of the disease in the exposed individual. In many instances this interval is not less than fifteen years and sometimes as much as twenty years. Of course, there are many other possible sources of infection, but these are really much less potent than advanced cases with whom the patients have associated for a longer or shorter length of time.

It has been pretty definitely proved that tuberculosis is a disease of childhood and primarily a disease of the lymphatic nodules. However, it has also been shown that tuberculosis does not produce absolute immunity and that tubercle bacilli vary in virulence. It is, therefore, inevitable that tuberculosis occurs also in adult life. Unfortunately, the incubation period of tuberculosis is so indefinite that we do not consider tuberculosis as infectious or contagious as some of the acute diseases, and, consequently, on account of its insidious onset

and the very slight initial symptoms, we have not in the past given the attention to this important part of the work that we should have given.

The general practitioner as a rule cannot dissociate tuberculosis from the classical symptoms that have been handed down from the time when the disease was diagnosed by its symptoms alone : the consumed body, the hectic flush, drenching night sweats, the incessant cough, and the coughing up of quantities of pus. In order that an early diagnosis be made in contacts, it is necessary for physicians to be familiar with the symptoms of incipient tuberculous disease. At this stage patients may be cured without being compelled to enter a sanatorium.

Statistics show that persistent tired feeling and evening elevation of temperature are the most frequent of the early signs of active tuberculosis. Too many physicians are in the habit of considering a slight fever as unimportant and of explaining it away by saying the patient is nervous, etc. They do not realize the value of the thermometer in the diagnosis of tuberculosis.

Among the other early symptoms are nervousness, lack of control of temper, persistent indigestion, slight cough or irritation in the throat, slight hoarseness, and loss of weight, appetite and strength. Pain in the chest may be present but is not necessarily of the sharp knife character that physicians usually associate with pleurisy, but may be any kind of abnormal feeling in the chest.

It is very unfortunate that physicians ordinarily feel that they must get a bacteriologically positive sputum or on auscultation find moisture in the chest before diagnosing tuberculosis. They do not appreciate, as specialists do, the value of skin tests, X-ray examinations, etc., as diagnostic aids in early cases. In a few cases it may be impossible, even with

the help of these technical examinations, to say definitely that the trouble is or is not due to the tubercle bacillus. It is far better for the general practitioner to consult in these questionable cases with a specialist than to say that the suspected patient is not tuberculous because the stethoscope and microscope say so.

We are not getting the results that we should in our sanatoria because we wait for the patient to become advanced before we begin to treat him. The general practitioner may feel very enthusiastic about the improvement brought about in his advanced cases in sanatoria and well he may, because they are fat and look well when they return to their homes, but experience has shown that they too often have a relapse. If we are ever to advance very far we must treat the disease in its inflammatory stage, and this we can do in many instances by examining contacts for signs of tuberculous activity.

### FISSURE OF THE ANUS.\*

By Charles J. Drueck, M.D., Chicago.

A fissure is a solution of continuity of the tissues at the anus or of the anal wall, caused by traumatism of a hard fecal mass, a foreign body or the straining at stool or at urination, and characterized by acute pain during or after each stool.

Of all the distressing lesions of the human body there is nothing which approaches anywhere like the suffering with so apparently slight a pathology as a fissure of the anus or which causes so far-reaching results. But if this condition is recognized early it readily yields to treatment. Even old cases where the patient's vigor and nervous stability have been shattered the fissure may be cured and physical health

restored. All ulcers in the rectum or anus occasion some pain, but fissure is distinct from the destructive and extensive ulcers.

A fissure occurs more frequently in the posterior quadrant of the anus near the posterior commissure, or occasionally in women in the anter quadrant, but rarely upon the lateral walls. It may be found anywhere from the muco-cutaneous junction to the upper limit of the columns of Morgagni ; the majority beginning at the upper end of the anal canal, at the lower border of the internal sphincter and extend downward. Infection readily takes place in the abraded surfaces, burrows up or down beneath the mucous membrane, or the lymphatics carry it into the ischio-rectal, anterior or posterior rectal spaces and an abscess or, perhaps, a fistula may result.

#### Etiology.

The fissure is distinct from ulceration due to proctitis, gonorrhœa, chancroid, syphilis or tuberculosis in its etiology and symptomatology although not in its physical characteristics (size, depth or shape). Many plausible theories have been advanced as causes of fissure, but which after all are dependent upon the fact that the individual has suffered with constipation which has permitted fecal masses to remain in the rectal pouch until they have caused local congestion, or perhaps pressure necrosis or ulceration and also autointoxication. Concretions, sometimes stony hard, are expelled with considerable straining and difficulty, thereby dragging down and tearing the mucous membrane. The trauma may be produced by a foreign body, bones, bits of toothpick or the like in the stool, or from injury with an enema tip, or the straining occasioned by coughing or sneezing. Also, anything which narrows the lumen of the anus, as a polypus, stricture, congenital malformation, pregnancy or parturition, tends to drive a hard fecal mass unduly harshly against the

mucosa as it passes. The fissure may also originate from an inflammatory condition or an edema at or near the anus, which softens the tissues and weakens their natural resistance.

Infection occurs in the ulcer, thereby irritating and inflaming the delicate nerve twigs, and sets up a spasm of the sphincters. This spasm in turn causes constant motion of the base of the ulcer, besides rubbing infection into the wound. Thus we have a vicious circle established.

Fissures occur in all ages and conditions of life, but particularly in the young adults. In infants fissure is often an expression of syphilis, but not always. Fissures are estimated to make up 20 per cent of all rectal disturbances. There is considerable difference of opinion as to its occurrence in men and women. Lynch says it occurs twice as frequently in women as in men, but Goodsall found it oftener in men. The fissure is nearly always single except in chronic proctitis, gonorrhœa and syphilis, when it is usually multiple.

#### Pathology.

The anal fissure is an elongated rent in the mucosa and is limited to a sulcus between two radial folds of the anal wall. It spreads up and down by the action of the feces against the membrane, but not laterally. The ulcer is very like the crack in the epidermis of the hands when chapped. If the mucosa were spread out the ulcer would prove to be somewhat circular in outline.

The abrasion or tear, which at first is superficial, soon becomes an ulcer by infection. The edges are thickened by inflammation of the surrounding mucosa and undermined by the constant muscular spasm of the wound. The whole depressed surface of the ulcer is at first bright red and bleeds easily when touched. Later fatty, grayish granulations, mucus, pus, and pseudomembrane cover the surface. At this time the edges are pale, indurated and distinctly undermining.



with sinuses leading into the surrounding tissues. The whole ulcer and surrounding mucosa is distinctly congested and the muscular wall beneath it which has been laid bare is spasmodically contracted. At the lower end of the fissure the mucous membrane or muco-cutaneous border is frequently hypertrophied, resembling a pile, the so-called sentinel pile, which is sometimes divided into two parts by the fissure. It is excruciatingly painful to the touch and if manipulated brings on the characteristic pains. Cicatrization and apparent healing is always going on in the ulcer, but repeatedly breaking down again. The ulcer may, perhaps, heal over temporarily, but will soon be torn open by hard fecal masses or straining at stool. Such conditions alter the vascular and nerve supply of the parts. A thoroughly inflamed fissure closely resembles a chancre and may be difficult to differentiate. The local history and the absence of other syphilitic symptoms determining.

#### Symptoms.

Patients generally cannot date the onset of the first symptoms. Occasionally there is a history of a sensation of something giving way during a difficult constipated bowel movement with perhaps a slight discharge of blood. Usually he states that there has been for sometime an itching or pain when defecating or immediately after and often accompanied with a drop or two of blood which stains the sides of the fecal mass or is noticed on the toilet paper. There is no visible discharge of pus or mucus.

From the beginning fissure causes pain, which at first is due to the trauma and the raw surface exposed to the irritating action of the fecal passages. It is burning, cutting and tearing, comes on with or immediately after the passage of the stool, but lasts only a short time, a few minutes. Soon the wound becomes inflamed and the pain and smarting

may continue for one-half to one hour and be so severe that the patient cannot arise from the toilet or must seek his bed to lie there in agony until the pain subsides. After the pain disappears he may get up and attend to his usual duties in peace until the next bowel movement, when his seance is repeated.

Later the wound edges are thickened and are jammed into the ulcer by the contracted muscle and the pain is constant, although with especially severe paroxysms with each and every bowel movement. The pain is changed in character from that experienced earlier and is dull, throbbing, aching like a toothache and radiates to the back, especially the sacro-iliac joint, and shoots down the legs and may last for several hours or even all day. Some such patients are never free from pain. These pains may be referred to the prostate or the ovaries and mislead our diagnosis.

Pains occurring immediately after defecation indicate involvement of the external sphincter or the muco-cutaneous margin, while those pains which come on some time after stool indicate ulceration high up in the rectum. These latter ulcers are usually of long standing. Generally speaking the acuteness and severity of the pain are in relation to the nearness of the ulcer to the anal margin. Also the wider the skin involvement the greater the pain.

Constipation is sometimes complained of, or is occasioned by restraining the regular evacuations because of fear of the pain following the bowel movements. Later it becomes a habit and as a result the stool is more painful because the detergent material is harder, dryer, and more irritating the longer it is retained and when expelled causes much more pain and injury.

Frequent urination and dysuria are often found as reflex symptoms early in this affection and may be overlooked or the

patient may be treated without avail for cystitis urethritis, urethral stricture or prostatitis, especially if the pain in the rectum following the defecation is not very sharp. This frequent desire to urinate may come on every fifteen or thirty minutes. A few ounces only is voided at a time and there persists an annoying dribbling accompanied with a spasm of the vesical and anal sphincters and a feeling of uneasiness at the anus. Sometime ago I saw a patient in whom this annoying reflex was repeatedly set up by a fecal accumulation in the rectal pouch, but which would promptly subside with a rectal flushing. The sympathetic nerve supply of the bladder, urethra and rectum is so closely interwoven that irritation of one part is readily reflected to another. Many widespread reflex disturbances due to nervous exhaustion from the constant pain and the disturbed action of the bowels may result from a fissure.

### Diagnosis.

The diagnosis of fissure in ano is relatively easy. The anus must be carefully examined and the subjective symptoms confirmed by the local findings, as pain of a similar character may be due to a number of other conditions. The patient is placed on his left side and asked to bear down. The buttocks are gently separated and as he strains the fissure usually comes into view. The sentinel pile, if present, is recognized or it may be that the ulceration involves the muco-cutaneous margin.

If not seen, the skin about the anus is to be firmly but gently palpated. An hypertrophied sphincter will be noted and pain elicited on pressure over the region of the fissure. By this procedure the location of the fissure is determined and the digital or specular examination made less painful. In woman a finger introduced within the vagina can exert

the rectum, or at least the anterior wall, and expose the ulcer to view.

Ulcers situated above the external sphincter cannot be everted and are examined through the speculum ; the conical, fenestrated or a Sims vaginal speculum according to the needs of the individual case. Sometimes the fissure is obscured to vision by a hemorrhoid or by edema of the surrounding mucous membrane and may not be easily seen until the whole anal wall is carefully searched by separating the anal folds one field at a time.

Digitally we may find the fissure and determine the condition of its base and edges. When introducing the finger, bear in mind the excruciating painfulness of manipulating an unprepared fissure and crowd the finger to that segment of the rectum opposite the location of the fissure. Introduce the finger its whole length and examine that part of the rectum above the fissure as well as around and below it to determine anything else that is wrong.

These maneuvers are always painful, but may be rendered less so by spraying the anus with cocaine solution and by placing within the anus a pledget of cotton saturated with the same.

Sometimes there exists an area of intensely inflamed and hyperesthetic mucous membrane associated with a spasm of the sphincter. This is not a fissure, but its symptoms are the same and it may be easily mistaken for an ulcer.

*(To be continued.)*

*—The North American Journal of Homeopathy.*

## POSOLOGY FROM A HOMEOPATHIC STANDPOINT.

"From the very beginning of the Homeopathic School, the question of dosage has been the battleground of discussion, where theory and speculation, and passion and ridicule, all pointing to results at the bedside, have done their utmost to befog the seeker after precise facts for his guidance. My own plea is for the subphysiological dose on the ground of its rationality and logical necessity in practising homeopathy. How far removed from the physiological dosage such homeopathic subphysiological dose must be, in any one case, cannot be determined *a priori*—it must depend largely on the patient's susceptibility and the class of medicine employed. Judging from the experience of the school, it occupies a rather wide range of possible attenuation of the crude drug, and therefore wide removal from the known physiologic dosage.

In the very nature of things, the required dosage of a medicine given homeopathically must be a different thing from the dosage when the same drug is given antipathically. While both uses of a drug are legitimate, the latter has nothing to do with homeopathy and is as a rule a well-ascertained definite quantity. In giving a drug according to its homeopathicity to a diseased condition, we know that a smaller, subphysiological dose is required if we want to avoid dangerous aggravation. Let us inquire into the reason of this experience.

Remember that every living organism is in the constant endeavor to keep itself intact, automatically and unconsciously to the individual: it possesses a power that tends to health. In other words, the living organism has a protecting sphere by means of which it endeavors to keep itself whole, which offers resistance to any foreign intruder, be it a drug,

or disease influence. This resistance of the body to anything that tends to disturb its health—its wholeness—must be overcome first of all before the drug or disease germ can manifest its peculiar and destructive power. If it is a drug, it has a certain amount of body resistance to overcome in establishing its physiological action in certain organs or tissues. Now, since the old school does not employ drugs according to similars, but according to opposites or different action, it must on that very account use large doses, large enough (1) to overcome the normal body resistance, and (2) sufficient to produce symptoms—its distinctive effects. Now, why is a smaller dose required if the same drug is administered according to the homeopathic law? Because here *no bodily resistance has to be overcome*, and a similar action already exists in certain organs and tissues. The disease has overcome the resistance of the protective sphere of the body and established its insurrectionary government, and the affected region is readily exposed to attacks from without. We offer as a remedy a drug we know from the provings to act similarly upon the very tracts involved. Hence, a much smaller dose is required, for the protecting gates are down. Other reasons for the smaller dose of homeopathy may be found in the exalted sensitiveness, caused by the disease process, and by the fact that our remedy, given singly and uncombined, is not interfered with by other agents. It seems plain, therefore, that comparative smallness of dosage is the one logical and obvious corollary of the application of the homeopathic law, and we all agree that the homeopathic dose of a remedy must be subphysiological.

Here we are on solid ground, but "subphysiological," looked at from the point of view of the clinical experience of the school, is found to be a wonderfully elastic term. It may include comparatively large doses as well as, judging from

the reports of the extreme high potency wing of the school, the highest attenuations ; for even these latter are credited with producing symptoms. Still, it seems to me that, granting this to be a fact, it is rather the exception and not the rule, and presupposes extraordinary susceptibility or other favoring conditions.

I think the tendency in the school at present is to be content with the Hahnemannian potencies, 1 to 30. From a pretty wide acquaintance with practitioners throughout this country and Europe, I do believe that in this latter day homeopathy of ours, barring the small minority of extremists, the large majority are indeed practically a-unit in their everyday practice in acute diseases by using the lower attenuations, those but little removed from immediate chemical and physical analysis, leaving the higher potencies to the extraordinary exceptional cases that present themselves, where we can satisfy our innate love of the marvellous and the occult.

I cannot resist the temptation of quoting Hahnemann's letter to Dr. Schretter in 1820, showing that he looked with distrust on any effort to continue potentization beyond the 30th.

"I do not approve of your dynamizing medicines higher, as for instance, up to the 30 or 60. There must be some end to the thing. It cannot go to infinity. By laying it down as a rule that all homeopathic remedies be diluted and dynamized up to the 30th, we have a uniform mode of procedure in the treatment of all homeopathists, and when they describe a cure, we can repeat it, as they and we operate with the same tools."

—*W. B. in the Pacific Coast Journal of Homeopathy.*

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XXVIII. ]

NOVEMBER, 1919.

. [ No. 11.

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## ABROMA AGEGUSTA.

By D. N. RAY, M. D., L. S. A.

*Bengali Name*—ULLAT-KUMBAL.

A native of various parts of India, growing to be a small tree. It flowers most profusely during the rains and the seeds ripen in the cold season. The leaves are used for medicinal purposes.

A tincture of the leaves has been prepared by me at the suggestion of a few friends who used the fresh juice of the leaves in cases of *Diabetes Mellitus* with very good effect. At their request I got some leaves and made tincture according to the class III of the American Pharmacopia.

I have been using this drug for the last ten years in cases of *Diabetes mellitus* and *insipidus* with highly satisfactory result. It is desirable that the medical profession and the public should have the advantage of my experience.



*Clinical*:—Diabetes mellitus and Insipidus ; albuminuria, Enuresis, Debility, Vertigo, Sleeplessness, Carbuncle, Amenorrhœa, Dysmenorrhœa.

*Relations* :—Camphor, acid phos., uranium nitric, syzygium, lactic acid.

*Mind* :—Irritability of temper, ill-humour depression of mind, fretful and morose, easily excitable, angry mood ; dislike for active work, moody, weakness of the brain ; contradiction unbearable ; sleepless night, at times full of dreams of various things. Forgetfulness ; absent-minded.

*Head*.—Empty feeling of the head at times, heaviness and discomfort ; rolling of the head and vertigo ; much giddiness ; constant uneasiness of head ; pain on the back of the head, tight feeling on the side of the head.

*Eyes* :—Weakness of vision, dull vision, puffiness of the lids, pain over both eyes at times heaviness ; inclination to drop eyes closed ; eyes get easily tired and watery ; paleness of the conjunctiva.

*Ears* :—Shortness of hearing ; buzzing in ears—pain in the ears ; sound in the ears ; discharge from ears.

*Nose* :—Sneezing several times, watery discharge from nose. Dryness of nose, the nostrils feel very dry with desire to rub.

*Face* :—Pale, yellow, wrinkled, old-looking, puffiness, dryness ; red spot on the forehead and cheeks itching eruption on the face with burning sensation turnuncles on the face.

*Mouth* :—Dryness of the mouth, almost constant, with desire for drinking large quantity of cold water ; excessive thirst, drinking does not relieve it, tongue clean and very dry ; whole of the buccal cavity is dry ; speech very feeble and indistinct, frequent desire to drink liquids ; insatiable thirst ; desire for cold drinks, lips dry and pale rather bluish.

*Throat* :—Dryness of the throat ; difficulty of swallowing solids ; burning sensation ; painfulness ; drinking liquids relieve throat symptoms temporarily.

*Appetite* :—Unnatural appetite, insatiable hunger ; can eat again a little after eating a good meal, desire for sweets ; burning thirst ; nothing seems to satisfy the hunger.

*Stomach* :—Hungry with faint feeling—desire for all kinds of food, sweets, acids, fish and meat, rice, bread ; not satisfied with eating ; not much of dyspeptic symptoms, no eructation, no heart-burn, no acidity or fullness of the stomach—can eat at any hour ; great relish for liquids, no dislike for solid food. Feeling of weakness when hungry ; enjoys meal well. Frequent desire to eat ; a feeling of emptiness of the stomach, the food does not seem to stay long in the stomach.

*Abdomen* :—Flatulence, distension of abdomen ; pain in the abdomen during the peristalsis, free passage of flatus.

*Stool* :—Constipation ; hard lumpy stool, passage of stool with 'straining—no stool every day ; torpid bowels, obstinate constipation periodically ; dryness of the rectum ; stools pass with difficulty, colour of

the stool brownish ; when very hard, blackish and knotted.

*Urinary Organs*.—Profuse urination both day and night ; passage of urine, very large quantity every time, passes urine every two hours, of profuse quantity, desire to drink after urination, he must drink, the mouth is dry and desire for drink, drink relieves thirst, drinks large quantity, the colour of urine is clear, a peculiar fishy odour with slight sediment ; turbid at times, passes from half pint to two pints or more of clear urine at a time, polyuria ; urine of high specific gravity containing sugar ; Glycosuria, diabetes mellitus ; feels weak and exhausted almost each time he passes urine, passes some ten to fifteen pounds or more urine in twenty-four hours, passes urine frequently and large quantity of passage of urine relieves the bladder, increased flow of urine ; urgent desire to pass urine ; nocturnal enuresis ; gets up at night to urinate several times ; the quantity of urine more at night ; frequency of urination more in the afternoon but the quantity passed is less ; burning sensation at the mouth of the urethra.

*Male Sexual organs* :—Free flow of urine, rawness of the orifice of the urethra, soreness of the meatus, whitish ulcers round the mouth of the prepuce caused by the passage of excessive sugar in the urine ; smarting and violent itching of the part ; absence of sexual desire, inability to coition, extreme exhaustion after coition ; weakness of sexual organs, swelling of the testes, hanging of the testes.

*Female Sexual organs :—*

Catamenia irregular, premature, too short or too long lasting ; colicky pain in the lower abdomen during or a day or two previous to the appearance of the menses ; blood is dark, clotted, profuse or scanty and pale ; vertigo, nausea, vomiting and at times hysterical spasm ; it is useful both in dysmenorrhœa and amenorrhœa—painful menses due to tending of the uterus ; leucorrhœa, profuse of whitish, thin, or watery discharges in thin, sickly looking young girls ; chlorosis ; respiratory organs : cough worse in the evening and night ; cough with purulent expectoration and pain in the chest. Cold air excites cough ; expectoration is free ; coughing causes pains in the chest ; side pains has to hold his chest when coughing ; bronchites ; broncho-pneumonia with a good deal of expectoration. Character of the sputum whitish, yellowish and lumpy. Hurried respiration, sinking feeling in the chest.

*Heart :—*Weakness of the heart with anxiety ; great uneasiness in the cardiac region, palpitation, worse on movement ; feeling of great weakness in the chest ; heart's action regular, feeble ; faintish feeling.

*Neck, back and limbs :—*Weakness of neck and spine ; dull pain in the back ; pain all over the limbs, weakness of the lower limbs ; emaciation of both upper and lower limbs ; pain in the region of the kidneys with stiffness of the loins.

*Skin :—*Dryness of the skin, scratching of the skin ; burning of the skin, disturbing night's rest, many

small boils ; worse during summer months ; carbuncle, carbuncular abscesses.

*Sleep* :—Drowsiness without being able to sleep ; sleeplessness, frequent urination at night disturbing sleep ; sleep better in the early part of morning, unrefreshing sleep.

*Fever* :—Dry heat over the whole body ; slow fever with great thirst.

*Generalities*. —Great uneasiness ; languidity ; feeling of extreme exhaustion, inability to do any active work, disinclination to work ; irritability of temper ; great loss of flesh ; rapid emaciation ; paralytic weakness ; weariness of all limbs ; burning sensation all over the body ; frequent thirst for large quantity of water with dryness of the mouth ; frequent profuse passage of urine, worse at night, sleeplessness or disturbed unrefreshing sleep. Menstruation painful and scanty or painful and profuse, pain on both side of the lower abdomen, hysteria in weak women with menstrual troubles.

## Materia Medica Notes.

### ANTIMONIUM CRUDUM.

It is a great remedy, an antipsoric but rather neglected by our physicians. We only take into consideration that it is only a gastro-intestinal medicine but its sphere of action is very extensive.

In the mental sphere it has suicidal mania, loath-

ing for life, sadness and weeping ; sentimental and distrustful. We can use it in cases of insanity where the above symptoms are prominent.

Headache and Vertigo are amenable by Antim. crud. Violent headache after cold bathing. With headache and vertigo there is usually gastric symptoms. In pustular, conjunctivitis with mucus from the eyes, excoriation and lachrymation.

Its usefulness in gastro-intestinal diseases is unique. Gastric derangement of women, children and old people. Thickly coated milk-white tongue, overloading the stomach, dryness of mouth and great thirst, constipation alternating with diarrhoea. We have employed Ant. crud. in dyspepsia, chronic intestinal catarrh, cholera infantum, nausea and vomiting.

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## PRACTICE OF MEDICINE.

### HYSTERIA.

Hysteria is a nervous disease characterized by convulsive attacks which become chronic in time.

**Causes.** Females are more affected than males. Heridity plays an important part in this disease. Most attacks are between 15 to 30 years of age. Faulty training is another important cause.

**Symptoms.** Attack commences mostly in weeking nerve during sleep. Before convulsion the patient's mental condition varies, at one time laughing and at another crying. Then a ball is rising in the throat

and chest and then hands and feet are moving in all directions. Eyes upturned, hearing nothing, very exhausted. Then the patient sleeps.

Mental disturbances are various and capricious ; emotional and delirious. Sometimes actual hysterical insanity takes place.

Motor disturbances are hysterical convulsions. They may be simple twitching to violent movements of arms and legs. Paralysis of some muscles may take place.

Sensory disturbances, hyperæsthesia is the principal and also nervousness. Anæsthesia is not uncommon. Indigestion, flatulence and heart-burn are often noticed. Contraction and sense of constriction in throat cause a condition generally known as "globus hystericus" which is very painful to the patient.

Hysterical patients have great uterine disturbances. Menstrual disorder of various kinds.

**Treatment.** To treat hysterical patient is a very difficult task. It requires great deal of tact and patience on the part of the physicians and nurses. During fits only sprinkling water on the head and face or a fine puffs of Rubini's Camphor or Belladon. on the nose is all that may be necessary.

**Nux moschata**—It is an important medicine for weakness and convulsion. Mental states changeable, at time merry and at another sorrowful. Crying and laughing alternately. Menses late and scanty with pain. We have cured cases with this medicine.

**Valerium**—All senses are acute, hyperæsthesia and

debility, mental fear and hopelessness. Head-ache, malaise. Some thread hanging round the throat.

*Ignatia*—*Globus hystericus*, always sorrowful and crying, hearing breathing. Symptoms always changeable.

*Viola odor*—Many think it a very important medicine. We have no experience. The patient perceives a bad smell, inclination to cry but knows no reason. Painful breathing and palpitation.

*Pulsatilla*—From menstrual and uterine disorder. Cutting and tension in uterus, contraction of throat, crying and morose.

*Moschus*—We have used it often and with good effect. Pain in body, tearing eyes even from slightest cause. Convulsion, staring and upturned eyes. Pupils contracted. Intense headache; Lasciviousness. Inhalation during fits is often useful.

*Natrum. mur.*—Self-consciousness is often a prominent symptom in hysteria and *Natrum* is the best here. We have cured a very remarkable case in a young girl of this clairvoiant state by *Natrum* high.

*Asafetida*—Convulsion, globus, esophagus affected, tympanitis, nausea, pain in stomach.

*Tarantula*—Hysterio-epilepsy, distress in chest and difficult breathing, copious urination. Tympanitis hands and feet moving.

All mental excitement prohibited. Novel-reading and theatrical scenes to be avoided. Must always be engaged in bodily and pure mental work.



For headache Bellad, Nux and Sepia. For globus. Coffea, Ignat and Platina.

### TETANUS.

It is also called Lockjaw. It is an acute infectious disease caused by tonic spasms of certain muscles of the body, particularly the muscles of jaw.

**Causes.** Most of the tetanus cases are caused by wound. A specific bacilli called tetanic bacilli is considered as the cause of the disease. There is also ideopathic tetanus caused by cold and depressed state of the system.

**Symptoms** Rigidity of the muscles of face and neck, is the first symptom noticed. It gradually increases and the jaw is firmly locked and cannot be opened. Face appears of a peculiar condition which is called "risus sardonicus." The eyes are staring, pupils contracted. Patient is rather bent back—called opisthotonus, and rarely bent forward—called emprosthotonus, sometimes bent sideways—plurosthotonus. Sometimes there is relaxation, but on touching the patient contraction comes on again. There may be fever. Death generally takes place from paralysis of the respiratory muscles or heart.

**Treatment.** In the treatment of this disease Nux vom. or Strychnia plays an important part. We have been able to cure some cases by Strychnine 30. Nux vom. is also good in higher potencies. We have also cured a child with Opium 6x. In this case there was no fever but red face and sighing, breathing and con-

traction of muscles. In one case after exposure to cold Rhus tox. did a good deal of amelioration. From injury Hypericum is our best help. Arnica may be tried, Curare is useful in some cases. We have seen Canabis Ind. as a good remedy in tetanus cases.

Bellad, Cicuta, Conium, Gelsem, Lachesis, Physostigma, and stramonium may be used with indications.

### PARALYSIS.

Loss of voluntary motions of muscles is called paralysis. When it is of less degree it is called paretis. When all muscles of the body are affected it is general paralysis; when half of the body affected, it is hemiplegia; when the lower part is diseased, it is paraplegia.

**Causes.** It is caused by disease of motive nerve centres in the brain and spinal cord. Injury to these centres often causes paralysis of the parts supplied by nerves. Alcoholism, many blood diseases are followed by paralysis.

**Symptoms.** Power of motion is lost and subsequently the parts become atrophied. Following kinds of paralysis are mentioned by authors:—

1. Progressive muscular atrophy. In this muscles are decayed and the deltoid muscles are particularly affected. In this Argent. nit. Causticum, Plumbum and Sulph. are useful.

2. Infantile paralysis—The little children are affected from fever and convulsion. Aconite,

Bellad, Calc. c, Gelsem and Phosph. are its remedies.

3. Writers' Cramps. It originated from excessive pen works. Bell. Gelsem, Causticum, Nux v, Ruta, and Zincum, are useful in this disease. We have cured one case with Zincum Phos 6. and another with Physostigma. Dr. Hughes recommends Arnica.

4. Pseudo-hypertrophic paralysis, also called Duchewpalsy. Aurum, Kali.iod, Phosph are best.

5. Paralysis agitans is a disease of old age. Sexual abuse, alcoholism &c. are its causes.

Arsenic, Baryta c, Causticum, Lycopod, Phosph acid, Zincum Phos, Tarentula. and Strychnine phos.

Nourishing food and avoidance of all bad habits are necessary. Higher potencies are more efficacious, especially in chronic cases.

#### HYPOCHONDRIASIS.

This disease is characterized by hopelessness and melancholic state of the mind of the patients.

**Causes.** Men are more frequently affected than women. Age generally from adult to advanced. It is very difficult to find out the cause. Sorrow and grief, mental anxiety and long suffering from some disease.

**Symptoms.** Symptoms are various. Dyspeptic symptoms with flatulence and constipation are more or less present. Depression of mind. Thinks his disease will not be cured. Symptoms aggravated during full

or new moon. Acidity, heart—burn, palpitation, feeling of weakness.

**Treatment.** Great care is required in the treatment of this disease. Patient's confidence should be gained by sympathy and careful observation and examination.

Nux vom. is a great medicine in hypochondria. Dyspeptic symptoms, tympanitic distention after food, constipation, sedentary habits, irritability of mind, over-dose of all kinds of medicines.

Sulphur—Next to Nux v, Sulphur is our great help. Overeating, piles, liver is inactive.

Staphysagria—if caused by sexual indulgence. Mind depressed from grief or sorrow. Overdose of Mercury.

Natrum m. Dr. Baehr considers it a great medicine and we also endorse his views. Sedentary living, sorrow, from excessive mental labor or malarious infections.

Conium, Phosphor, Stanum, Calc c, Acid Phos may be needed.

### INSANITY.

Derangement of the natural mental state is Insanity. There are various kinds of insanity.

**Symptoms.** Delirium is the first symptom noticed. Headache, sleeplessness, restlessness and excessive walking. Patient thinks that he is above all people. He is suspicious, that all persons are against him and trying to do mischief. Excessive fear or cheerfulness.

ness. There is melancholia. Rage, tries to commit suicide or kill other people. There is want of shame, remain naked and make jestures of various kinds. In acute mania the patient becomes violent and does extraordinary things.

**Causes.** Heredity plays an important part. Epilepsy and some other nervous diseases are often followed by Insanity ; some poisonous things and drugs cause insanity as Gunja, Opium &c.

**Treatment** Homeopathic treatment is very efficacious in this disease and Hahnemann was the first physician who discovered and followed humane treatment of insanity.

**Belladon.** is the first medicine, rage, restlessness, headache, pupils dilated and all sorts of violence. We have cured a young man with Bell 200. He is now all right for nearly twenty years.

**Opium**—is a medicine for all kinds thoughts, sleepy.

**Canabis Ind.** Dilations of space and time. Thinks he is hearing musical sounds, as if he is above all people.

**Platina**—thinks he is above all human beings, he is very rich and learned. Fear of death. In women sexual excitement and menstrual disorder.

**Lachesis**—change of thoughts from one subject to another, suspicious, talkative, has visions, melancholia.

**Stramonium**—very similar to Bellad. but to a greater extent. Very violent, tries to strike and bite, sees rats and snakes ; Fear. We have benefited a patient with this.

Verat. alb.—very much like stramon. Irritable and restless, for religious mania verat. is very useful and so sulphur.

Anacard.—There are two will one commands to do a thing another forbid it excited, tendency to curse, memory lost, woman thinks that child is not her own.

Calc c.—On closing eyes sees many kinds of visions, thinks that he will be insane.

Aurum met.—neglect for life, tries to commit suicide.

Arsenic is also very much like Aurum. Hopeless, thinks no body cares him, rage, gonorrhea.

Number of other medicines are used in this disease patient must be carefully nursed, kindly but firmly.

## HOW TO BE A SUCCESSFUL PHYSICIAN.

When any patient comes for treatment a physician should at first consider, according to what section of the *Organon* he is to treat his patient. The writer is sorry to observe that three-fourths of his patients are treated after the advice given in section 232 of the *Organon*. The section says that "The order of alternating diseases is also of great variety, but all belong to the class of *Chronic Diseases* which are mostly products of developed psora. In some rare instances they are complicated with syphilitic or sycotic miasm. In the first instance, they are cured by antipsoric medicine, but in the latter case the treatment should be conducted by alternating antipsorics with antisiphilitics or antisycotics, accord-

ing to the instructions contained in the book of *Chronic Diseases*.

The writer is sorry to observe, because he is unfortunate to say that most of his patients come from different quarters, who are mostly tainted with the virus either acquired by themselves or congenital. Hence he is to prescribe for two or three miasms of chronic diseases, in alternation according to the instructions given in our illustrious master's work of *Chronic Diseases*.

Suppose you are to treat a patient who has the three miasms in his system. You must administer antipsoric, anti-syphilitic and antisycotic to cure your patient. You know that *Sulphur* is the king of Antipsorics, mercury of Anti-syphilitics and *Thuja* of Antisycotics. These medicines or others of the *Chronic Diseases* should be used according to the symptoms as developed by psora, syphilis and sycosis. The drugs should be given at long intervals, say 7th, 12th or 15th day after, by rotations. After 4 or 5 rotations you can expect to see your patient cured or much improved. After 4 or 5 rotations, please lengthen the intervals, that is, each of the three remedies should be administered once in a month. When you see your patient improving in health, better give a pause as long as the curative action of your drug continues. When the action of your administered remedies is at a stand-still, occasionally use a dose or two and you will see your patient's complete recovery.

As to potency, I generally use 200th and sometimes 1m and c. m.

Here I cannot refrain from mentioning a few wonderful cures of intermittent fever of a Deputy Magistrate who was under the treatment of a renowned allopathic M. D. of the metropolis. The patient was under the treatment of the M. D. more than a year, and he was cured with a single dose of our

*Natrum muriaticum* c. m. The patient was about six months at Modhupur for a change, but to no effect.

Another patient Babu Rash Behari Dhammic suffered from fortnightly fever for 6 years. Of course heavy doses of quinine were given without any effect. The patient told me that he took phials of sulphate of quinine during the long six years and was also treated by renowned Kabirajs. This patient was cured with a single dose of *Lachesis* 1m. of Boericke and Tafel.

*(To be continued.)*

Nilambar Hui,  
Serajgonge.

## A BRILLIANT SUCCESS—HOMEOPATHY.

A Case of Vesical Calculi, (stone-Bladder.) Cured without operation.

A girl aged nearly 14 years living...Mohalla Madanawala was suffering from frequent urination, severe, agonizing, burning pain, micturition, urine also containing some blood coming in—drops only. The case was diagnosed by an allopathic Doctor of Vesical Calculi. But got no relief from the allopathic treatment of 5 days. At last operation was advised. But one man consulted with me about the case, upon which I advised him to take recourse to Homeopathic treatment; so I was sent for to see the case at 4 P. M. on 2nd Dec. 1919. I found the symptoms quite corresponding to *Canth* (i. e. Burning, agonizing pain at the end of urethra during micturition, urine frequent etc.—small quantities of blood also). I gave her a dose of *Nux v* to be followed by *Canth*. after every 2 hours. Just judge my utmost pleasure when early on the next morning her mother came to me with cheerful heart with a stone of a conical shape equal to the size of 2 grams



in her hands saying that at 1. a. m. the stone has come out and his girl was all right now, slept a sound sleep after the misery of 5 days and nights. Now just judge for yourself that it is Homeopathic medicine which saved her from the trouble of a tedious operation and its possible complications and other expenses etc. The stone is with me yet.

## II.

An old man who lives—Mohalla Malkanwala, once got a big swelling upon his back, which increased too much within 2 days, and small holes appeared on its surface. The case was diagnosed by an allopathic Doctor of Carbuncle and a speedy operation was advised. I was consulted about the case. I gave him *Rhustox* for a few days internally and swelling reduced, gone away and the remaining abscess having one month was cured by dressing without operation.

There are some other cases which I can send for publication if you like and can give space in your monthly Review ; any service would oblige me here. I am glad to hear that the Institution we got our training from (i. e. The Calcutta Homeo ; Medical College ) is flourishing by leaps and bounds under your kind control. Please ask the Supdt. of the College to send me a copy of the present Prospectus of the College and oblige. B. C. to Mr. P. C. Majumdar, G. L. Gupta, S. K. Nag, D. N. Roy.

Kindly change my former address and send the I. H. R. future to my present address and oblige.

Dr. Mohar Singh,  
H. M. B. (Cal).  
P. O. Khushab.  
Dist. Shahpur  
(Punjab).

## MARVELLOUS CURE OF PYROGEN.

This has been done recently by me. I request it being included in your Review for which I shall be much thankful.

A baby, 12 months old had an attack of fever and looseness of bowels with distension of the same ; was placed under the treatment of a Homeopath of this station, but to no purpose, after 3 days' treatment was changed and an eminent physician (Allopathic) whose practice is very rolling took the case but in 3 days no check was noticed, rather the case was getting worse. Baby used to pass 40 stools in a day with high fever. At last I was called at the time of great restlessness ; while the baby was rolling over the bed like anything. I was stopped there for whole night and after having tried several Homeopathic medicines I hit upon Pyrogen 30 which was given and she was cured.

S. N. Sahay,  
M. B. (Homeo.)  
Monghyr.

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## FISSURE OF THE ANUS.

By Charles J. Drueck, M. D., Chicago.

*(Continued from page 237, No. 10, Vol. XXVIII)*

## Treatment.

There is no such thing as an expectant or palliative treatment for anal fissure. Opiates and sedatives increase the constipation, thereby increasing the injury and pain. Enemas of starch water and opium, lead water and opium and iodoform and oil are worse than useless. When the ulcer is due to syphilis, polypus or papilloma, our treatment is directed to them

instead of to the fissure ; also constipation or proctitis must be relieved or else the ulcer will soon recur. (See chapter on Intestinal Stasis).

Two principles found the treatment of fissure :

1. Rest.
2. Drainage.

Each case must be treated individually to obtain these results.

The bowels should be kept open if possible by a carefully controlled diet, or with enemas of olive oil or glycerine suppositories. A small enema of olive oil or glycerine given a short while before the usual time of defecation will soften the surface of the fecal mass and assist in its easy evacuation. Laxatives are contraindicated or in exceptional instances are to be used guardedly. Salines themselves and the liquid stools they produce are very irritating as are also the resinous cathartics like gamboge, podophylin, or aloes.

In recent fissures, before the wound edges are thickened or undermined or before pus burrowing has occurred, local dressing obtains good results. The anus and, if possible, the ulcer is sprayed with 4 per cent cocaine in 1-1000 Adrenalin Chloride solution and allowed to rest five minutes. A conical, fenestrated speculum is now carefully inserted with the shutter over the fissure, the shutter is withdrawn and the speculum gradually opened, bringing the fissure well into view. The ulcer is now sprayed with cocaine if it has not been reached previously and then painted with silver nitrate solution, 20 grains to the ounce, or with pure

ichthyol. Sometimes this occasions a spasm of the sphincter for a time after the treatment, but which may be avoided smearing the field promptly with

R Ung. Stramonii

Ung. Belladonnæ, aa.

In well selected cases a cure is accomplished by this course in two to four weeks and sometimes with only a few treatments. If not obtained within that time, the treatments should be discontinued and the fissure treated surgically. When the sphincters are hypertrophied and spasmodically contracted, or the ulcer is deep with indurated and undermined edges, or the sentinel pile has developed, or the muscle wall is exposed, local treatment as outlined above is not sufficient.

#### Surgical Treatment.

Divulsion of the sphincter muscles is one of the older methods that is still heard of occasionally. Although it does relieve and often cure the fissure, it requires a general anesthetic, produces undue traumatism of the mucosa, sometimes leaves a permanent injury to the sphincter whereby the patient loses the sense of approach of gas, or liquid material and sometimes loses full control even of ordinary fecal matter, and sometimes leaves a permanent neuralgia of the anus. It frequently does not afford permanent relief particularly when the fissure is in the posterior median commissure and is passed as not being good surgery of today.

Incision with drainage produces much better re-

sults and unless the sphincter is particularly irritable or the patient very nervous or hysterical the operation can be performed under a local anæsthetic.

#### Technic.

The patient, after being properly prepared, is placed in the Sims position is the work is to be done under local anesthesia, or in the exaggerated lithotomy position if under a general anæsthetic. A Sims speculum is inserted and fissure brought into view. Sinuses burrowing under the mucous membrane are sought with a probe and when found they should be widely opened. The thickened and undermined edges are carefully trimmed flat and the fissure incised at its base down to the muscle wall, bringing the wound well out into the skin to facilitate drainage. The edges of the fissure are trimmed away flat and also those of the incision extending below its lower end lest they obstruct drainage. The sentinel pile, if present, is carefully included in the parts cut away and also any papilla or small polypoid growths at the upper end of the fissure which might fall into the rent and hold the wound apart. Exuberant granulation should be curetted away. The wound is packed with gauze in layers. The upper layers are removed in twelve or twenty-four hours, but the lower layers are left until after the bowels are evacuated to prevent infection of the field. The upper layers of gauze are easily removed, but granulation and blood clots entangle the lower layers and cause pain. This suffering may be

minimized by washing the wound while the gauze is in place with warm saline solution and following with peroxide of hydrogen solution. The wound is washed with a mild antiseptic solution each day, after the bowels have evacuated, until the field is completely healed, which requires about three weeks. During these dressings the edges must be carefully kept open until the surface, and particularly the upper end of the wound, is thoroughly healed that drainage may be freely provided.

It is advisable, although not necessary, that the patient keep his bed for a day or two after the operation. The evacuations should be kept free and the movements soft, and after each defecation the patient should take a warm antiseptic sitz bath. There is at times some temporary incontinence following this operation, but it disappears as the wound heals. When the fissure has existed continuously for several months or when it has been operated upon and has not healed promptly, the possibility of syphilis will call for a blood examination and also tubercular, anemic or rheumatic factors must not be overlooked.

—*The North American Journal of Homeopathy.*

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# অপূৰ্ণ পুস্তক!!!

## হোমিওপ্যাথি-শিক্ষা।

বাগাড়ম্বর নহে, নিম্নে দেখুন, সকলে একবাক্যে  
বলিতেছেন, এমন পুস্তক আর নাই।

আ'জকাল গ্রামে গ্রামে হোমিওপ্যাথি-চিকিৎসক, বরে বরে হোমিও-প্যাথি ঔষধ, ইহা অবশ্যই আনন্দের বিষয়; কিন্তু বর্তমানে যে ভাবে হোমিওপ্যাথি প্রচার হইতেছে, ইহাতে হ্যানিমানের প্রবর্তিত আসল হোমিওপ্যাথি-শিক্ষা অতি অল্পই হইতেছে, বরং অনেকস্থলে হোমিওপ্যাথির অপব্যবহারই হইতেছে, কাজেই ফলও তেমন সন্তোষজনক হইতেছে না। বিধায় অনেকে হোমিওপ্যাথির উপর বীতশ্রদ্ধ হইতেছেন। তজ্জন্ত অধিকাংশ শিক্ষিত হোমিওপ্যাথিই হুঃখিত। কিন্তু অল্পায়াসে প্রকৃত হোমিওপ্যাথি চিকিৎসা শিক্ষা করা যায় তেমন কোন সুবিধাজনক উপায় বা সরল সংক্ষিপ্ত পুস্তকও এ পর্য্যন্ত না থাকায় সেই শিক্ষা হইতে পারিতেছে না। ঢাকা হোমিও-প্যাথি বিদ্যালয়ের অধ্যাপক, প্রবীণ অভিজ্ঞ চিকিৎসক—ডাঃ রজনীকান্ত মজুমদার মহাশয় বহু চিন্তা, গবেষণা ও অবিশ্রান্ত পরিশ্রম করিয়া সেই অভাব দূরীকরণ মানসে এই অভিনব প্রণালীর সংক্ষিপ্ত, সরল পুস্তকখানা প্রণয়ন করিয়াছেন। তাঁহার পরিশ্রম যে সম্পূর্ণ সার্থক হইয়াছে তাহা নিম্নলিখিত প্রশংসা-পত্রসকল দেখিলেই বুঝিতে পারিবেন। ভরসা করি হোমিওপ্যাথির সেবক বাতাই ইহার এক এক খণ্ড ক্রয় করিবেন। ইতি—

কে, সি, রায়।

হোমিওপ্যাথি।

নারায়ণগঞ্জ, ঢাকা।

## কয়েকটী অভিমতের সারমর্ম ।

কলিকাতার বিখ্যাত হোমিওপ্যাথি নাসিক পদ্ম হ্যানিম্যান লিখিয়াছেন :—“গ্রন্থকার পুস্তকখানাকে শিক্ষার উপযোগী করিবার জন্য যে পরিশ্রম করিয়াছেন, তাহাতে তাঁহার প্রশংসা না করিয়া থাকা যায় না। উপযোগিতা হিসাবে এমন সারগর্ভ পুস্তক অল্পই দেখিয়াছি।”

আমেরিকা প্রত্যাগত ডাঃ এন, সি, গুহ, এম, ডি, অহোদয় লিখিয়াছেন :—“এত সংক্ষেপে এমন সুবিস্তৃত, শিক্ষণীয় সারতত্ত্বপূর্ণ, সরল পুস্তক আর দেখিয়াছি বলিয়া মনে হয় না। আমেরিকায় এইরূপ একখানা পুস্তক প্রস্তুত হইলে, তাহা প্রকাশ মাত্র সহস্র সহস্র খণ্ড বিক্রয় হইত বলিয়া আমার বিশ্বাস।”

ডাঃ এস, এম, সেন, বি, এ, এল, এম, এস, অহোদয় লিখিয়াছেন যে :—“ইহার সঙ্গে তুলনা হইতে পারে বাহালা ভাষায়তো এমন কোন সংক্ষিপ্ত পুস্তক দেখিই নাই ; ইংরেজী ভাষায়ও ডাঃ কেট এবং গ্রাসের আদর্শ বক্তৃতা ভিন্ন এমন সারগর্ভ পুস্তক আর দেখি নাই। এই পুস্তকখানা হ্যানিম্যানের হোমিওপ্যাথির প্রকৃত পন্থা অনুসরণে লিখিত, স্মৃতির ঐহারা অল্প পড়াশুনা করিয়া হোমিওপ্যাথি চিকিৎসাকরতঃ অনেকস্থলে বিফল মনোরথ হইতেছেন, তাঁহারা এই ক্ষুদ্র পুস্তকখানা পাঠ করিয়া ঔষধ প্রয়োগ করিলে হোমিওপ্যাথি যে সর্বশ্রেষ্ঠ চিকিৎসা তাহা প্রতিপন্ন করিতে পারিবেন।”

কলিকাতা ডাঃ চন্দ্রশেখর কালীয়া হোমিওপ্যাথি কলেজের অধ্যক্ষ ডাঃ জে, কে, মৈত্র অহোদয় লিখিয়াছেন যে :—“এক কথায় বলিতে গেলে হোমিওপ্যাথির যাবতীয় জ্ঞাতব্য বিষয় অতি সহজে ও সরল ভাষায় এই পুস্তকে সন্নিবেশিত হইয়াছে। বিশেষ লক্ষণের ব্যাখ্যায় সমগুণ ঔষধের পার্থক্য দেখাইয়া দেওয়ায়, পুস্তকের মর্যাদা অত্যন্ত বাড়িয়াছে। দ্বিতীয়

ভাগের রেপার্টারী অংশ দ্বারা বাঙ্গালা ভাষায় হোমিওপ্যাথি পুস্তকের একটা বড় অভাব পূর্ণ করিয়া বিশেষ উন্নতি করা হইয়াছে।”

কলিকাতার খ্যাতনামা হোমিওপ্যাথ—  
কলিকাতার এল, এম, এস, আমেন্নিকার এম,  
ডি, ডাঃ এস্, কে, নাগ মহোদয় লিখিয়াছেন  
যে ঃ—“ইহা একখানি চমৎকার পুস্তক, বিশেষ লক্ষণগুলি স্বরণ  
রাখিবার জন্য প্রত্যেক ঔষধের শিরোভাগে (হেডিংএ) যে পদ্ধত্ব  
গ্রাথিত হইয়াছে তাহা অতি উপাদেয় ও প্রয়োজনীয়। এতদ্বিধি অত্যাশ্র  
সংক্ষিপ্ত সার (Ready reference) গুলি সর্বদাই চিকিৎসকের  
মাহাত্ম্যকারী হইবে।”

ডাক্তার লক্ষপ্রতিষ্ঠ খ্যাতনামা হোমিওপ্যাথ  
ডাঃ অবনীনাথ দাসগুপ্ত এল, এম, এস মহোদয়  
লিখিয়াছেন যে ঃ—“রজনীবাবুর ‘হোমিওপ্যাথি-শিক্ষা’ এক  
অপূৰ্ণ পুস্তক। তিনি পড়ে-গড়ে পুস্তকখানা এমন সুন্দরভাবে  
সাজাইয়াছেন যে, ইহা দ্বারা অতি অল্প আয়াসে প্রকৃত হোমিওপ্যাথি  
শিক্ষা করিয়া সূচিকিৎসক হইতে পারিবেন।”

ডাঃ হেমচন্দ্র সেন এল, এম, এস মহোদয়  
লিখিয়াছেন যে ঃ—“রজনীবাবু হোমিওপ্যাথির কঠিন কঠিন  
বিষয়গুলি এত সরল ভাবে ও সংক্ষেপে বিবৃত করিয়াছেন যে, ইহা দ্বারা  
অল্প শিক্ষিত ব্যক্তিগণও হোমিওপ্যাথির সারসত্য উপলব্ধি করিতে ও  
বিগুহ্ব হোমিওপ্যাথি শিক্ষা করিতে পারিবেন।”

ডাঃ যোগেন্দ্রচন্দ্র মজুমদার এল, এম, এস  
মহোদয় লিখিয়াছেন যে ঃ—“এই পুস্তকখানা সমগ্র  
হোমিওপ্যাথি শাস্ত্রের সার সংগ্রহ বিশেষ। অধিকন্তু ইহার পদ্ধত্ব,  
শ্রেণী বিভাগ, নম্বর প্রদান প্রভৃতিতে যথেষ্ট বিশেষত্ব, মৌলিকত্ব ও  
নূতনত্ব রহিয়াছে, সুতরাং কেবল শিক্ষার্থী বলিয়া নহে হোমিওপ্যাথির  
সেবক মাত্রই ইহা দ্বারা উপকৃত হইবেন।”

বঙ্গীয় ব্যবস্থাপক সভার সভা এবং প্রাদেশিক সমিতির সভাপতি অনামথ্যাত স্পষ্টবক্তা দেশনায়ক মাননীয় অখিলচন্দ্র দত্ত মহাশয় লিখিয়াছেন যে:—“দরিদ্র বঙ্গবাসীর পক্ষে স্বল্পত্ব হোমিওপ্যাথি চিকিৎসা যেমন উপযোগী, হোমিওপ্যাথি শিক্ষার্থী, পল্লী চিকিৎসক এবং গৃহ চিকিৎসকগণের পক্ষে এই পুস্তকও তেমনই উপযোগী; সুতরাং এতদ্বারা বঙ্গবাসীর যথেষ্ট উপকার হইবে বলিয়া আমার বিশ্বাস।”

কুমিল্লার সর্বপ্রধান ডাক্তার বঙ্গচন্দ্র দে, এল, এম, এস, মহোদয় লিখিয়াছেন যে:—

“ঔষধের বিশেষ লক্ষণ স্বরণ রাখিবার জন্য এই পুস্তকের পঞ্চ-সূত্রগুলি যেমন উৎকৃষ্ট পছন্দ হইয়াছে তেমন আর কোন পুস্তকে নাই। হোমিওপ্যাথি শিক্ষার্থীর পক্ষে ইহা অতি উৎকৃষ্ট পুস্তক।”

উড়িষ্যার প্রধান নগর কটকের লক্ষপ্রতিষ্ঠ ডাঃ ডি, সি চক্রবর্তী মহাশয় লিখিয়াছেন যে:—“কেবল শিক্ষার্থী ও অল্প শিক্ষিত বলিয়া নহে, উচ্চ শিক্ষিত চিকিৎসকগণের পক্ষেও এই পুস্তক নিতান্ত প্রয়োজনীয় ও আদরনীয় হইবে, কারণ এমন সংক্ষেপে এত সারকথা অল্প কোন পুস্তকে নাই।”

মূল্য ১ম ভাগ ১১০ টাকা, ২য় ভাগ ১৮ টাকা এবং দুইখণ্ড একত্রে

উৎকৃষ্ট কাপড়ে বাধাই ২১০ টাকা।

প্রকাশক—আর, কে, মজুমদার এণ্ড কোং ঢাকা

উপরোক্ত ঠিকানায় এবং ঢাকা ও কলিকাতার প্রধান প্রধান হোমিওপ্যাথি ঔষধালয়ে প্রাপ্তব্য।

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হোমিওপেথিক

# চিকিৎসা-সার ।

মূল্য ২।০ টাকা, ডাকমাণ্ডুল স্বতন্ত্র ।

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Monthly Journal of Homeopathy and Collateral Sciences

EDITED BY

P C MAJUMDAR, M D, & J N MAJUMDAR, M D.

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- 2. The development of Homeopathic Practice of Medicine and Materia Medica, especially the proving and clinical application of various drugs of the country
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knowledge of their employment constitute medicine.

—HAHNEMANN.

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XXVIII.]

DECEMBER, 1919.

[ No. 12.]

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## EPIDEMICS IN CALCUTTA.

This cold season we have again to combat with influenza. We thought we had seen the last of it, but we regret to find that this pestilence has again made its appearance. As we have already noted, the disease itself is not very dangerous, but it leaves the victim in a very debilitated condition and often pneumonia develops with alarming rapidity. The throat seems to be the chief seat of infection and in many cases makes the patient absolutely miserable. Merc. sol. in the higher potencies seems to do very well. Phytolacca is another remedy that should be thought of. We have already noted the treatment of this disease in detail in a former issue.

The health-officer of our city notifies that there

will be a severe epidemic of small pox this year and urges people to get vaccinated. Already cases of small pox are seen here and there and the necessity of vaccination cannot be too strongly urged. Mandrinum and vaccinum are handy remedies at this time.

Beri-beri is another disease that has made its appearance. Howrah is a worse victim than Calcutta. We are treating many cases. We will note treatment in a later issue.

J. N. M.

## Clinical Cases.

### I

Babu—Sen, aged 38, of dark complexion, fairly strongly built, follower of a legal profession. A man of very active habits. He had been of late working very hard over one of his cases. He complained to me in April 1909 that he was passing copious urine both day and night, more at night; excessive thirst and loss of appetite; unrefreshing sleep. His chief complaint was a feeling of weakness and disinclination to work. He told me distinctly that he had been feeling weaker and weaker for the last few months but as he was very busy and worried over a big case of one of his clients, he could not think of his illness. Now, he had been feeling so bad that he could not

pay half the attention to the case, as he thought he ought to, and he could not afford to be ill at this stage of his case. But soon after he became a regular invalid and had not strength enough to go about much. This made me to have his urine examined. There was no other abnormality in the analysis of the urine except the presence of a large quantity of sugar, that is 27 grains to the ounce of urine and the specific gravity was also quite high (1035). I tried *Acid phosph* 30 and 200, *Uranium nit.* 6x and 3x ; *sizygium Jambolanum*  $\theta$  in one to two drops doses several times daily. This last had some effect in reducing the quantity of urine and the general weakness. So, this was continued for some time off and on. He felt worse again and on an analysis of the urine there was found no change in the sp. gr., nor in the quantity of sugar passed. On the 10th Sept., 1909, I put him under two drops doses of *Abroma Augusta*  $\theta$ , once daily. It was to my surprise that within a week or so he began to show symptoms of improvement. The quantity of urine and the frequency of urination diminished considerably and he began to feel better.

After a fortnight or three weeks I had his urine analysed again. There was then only 12 grains of sugar per ounce and the sp. gr. came down to 1027. The medicine was continued then every other day. In another fortnight or so, the quantity of sugar came down almost to a trace and the patient was feeling all right.

The patient was told to discontinue the medicine

with instruction to take the medicine again if he felt worse.

## II.

Babu—Chatterjie, aged about 28, a tall and stout married person, had been always enjoying good health, in fact he seldom was ill. He always led an active life. He had been a worker in the sun.

In the month of August, 1909, he was feeling suddenly an internal weakness. Soon after the weakness became so great that he was unable to attend to his work. He had the management of a small mill. This weakness was more marked in the morning. He habitually used to drink much as he had to work in the sun, and consequently he used to pass more urine. But the quantity of urine and thirst increased greatly and he was feeling extreme exhaustion. His relations naturally became anxious and his urine was analysed. It was found to contain 17 grains of sugar to the ounce of urine and the sp. gr. was 1027, but no other abnormality was detected. He was taking allopathic medicine at the time without much benefit. I was called to see him. I saw the analysis of the urine and asked the patient to measure the quantity of urine passed in 24 hours. It was found to be  $6\frac{1}{2}$  seers (13 lbs). He was a good eater but his appetite failed, his thirst greatly increased. He was taking 5 or 6 seers (10 to 12 lbs) of water in 24 hours, besides nearly 2 seers (4 lbs) of milk &c. He had no sleep during the night and was passing urine almost hourly or at the interval of an hour and a half. On August

25th. I gave him a dose of *Secale cor.* 200, 3 globules, and no medicine for 3 or 4 days. The very first dose produced a good impression, that is, he was feeling internally better, though there was not much change in the quantity of urine and thirst. However, the medicine was repeated or given for a week. As he was again feeling bad, a second dose of the same medicine in the same potency was repeated. He again felt well for a few days, but the medicine had no lasting effect. He was given *Secale cor* 30th, one dose every second day. He felt much better and was able to go about. The quantity of urine became less— $4\frac{3}{4}$  seers ( $9\frac{1}{2}$  lbs) in 24 hours, and the thirst also became proportionately less. This improvement also did not last long. I gave him *Acid phos* 200 and 30 without much benefit. At last I put him under *Abroma augusta* 0, two drops for a dose, twice daily. In 4 or 5 days he was feeling exceedingly well. The quantity of urine diminished to  $3\frac{1}{2}$  seers (7 lbs); thirst also became less; appetite improved, in fact he was feeling quite strong and energetic. He began to take walks both in the morning and evening more than a couple of miles each time. He said he got new life. The improvement was so rapid that in a fortnight's time he was strong enough to attend his work. But I did not allow him to do so. After some three weeks since he began to take the drug he was able to join his workshop and soon after he was able to work as his former self. He was asked to have his urine analysed but as he felt so well, he did not think it was worthwhile to do so.



## III.

Babu—Das Gupta, aged 32, one strongly built person, rather stout and of dark complexion. He was an Overseer by profession, hence he had a lot of outdoor work and in the sun, too.

He had been suffering from diabetes for some time and had been taking both allopathic and kabiraji medicines without much benefit. Latterly in the month of November, 1909, he started taking some homeopathic medicine. He said some Homeopathic practitioner gave him Acid phos, 200, Arsenicum alb. 200 and some other remedies which he did not remember. He saw me early in December, 1909, and presented to me a true picture of acute diabetes mellitus. The result of the analysis of urine was shown to me. The presence of sugar in the ounce of urine was 28 grains and the sp. gr. was 1035; besides there were Indican and Oxalic acid in the urine. However, I gave him one small phial of *Abroma augusta* to be taken one drop for a dose, three times daily and if he felt better he was to take twice daily. He went to his working place in the District of Palamow.

On the 26th of December, 1909, I got the following note from him. I am putting it here in his own words—"I am giving you a detailed description of my present health in comparison with that of my former health, *i. e.* before taking your medicine.

## Formerly

## Present state.

1. Thirst—Intense thirst. Have to drink 10 to 12 big glasses of water or more in 24 hours.

2. Micturition—12 or 13 times in 24 hours and passage of large quantity of urine, over  $\frac{1}{2}$  seer each time.

3. Appetite—voracious.

4. Bowels—costive

5. Temperature—  
Below normal

1. No thirst. Have to drink only 3 or 4 glasses of water in 24 hours, but occasionally have to drink a glass at 2 or 3 A. M.

2. 6 or 7 times in 24 hours and also in less quantity.

3. As usual with any man.

4. No constipation,

5. Below normal,

I am still taking one drop for a dose, twice daily and shall continue it for a long time. So, I hope, you will be kind enough to send me another phial of the medicine, if you have not yet posted it."

Camp Kullean,  
Dist. Palamow.

The 11th. January, 1910.

"I am glad to acknowledge the receipt of medicine kindly sent by you.

I am glad to inform you that there is no thirst and micturition has become normal ; now I feel much better."

Camp Bhabanathpur,  
Palamow.

The 30th. January, 1910.

"I am sorry to let you know that I could not get my urine examined, which I expect to do within a week when I shall be at Daltangunj. Now, I feel much better and pass the night without any micturition."

"I am requested by one of my uncles, who is also suffering from diabetes to let him know the name of the medicine, which you prescribed for me, as he is willing to take that medicine. If there is no objection, please let me know the name of the medicine and I shall communicate with him."

Daltangunj.

The 7th. Feb. 1910.

"I am glad to inform you that I have had my urine examined. The result of the examination is as follows : Sp. gravity—1022 ; Sugar gr. 3 per ounce.

Please let me know at your earliest leisure whether this Sp. gr. will do any harm to my health. If you think proper to continue the medicine for a month more, please send me another phial of medicine at an early date."

"I hope you have received my last letter, written from camp, in which I asked you to let me know the name of the medicine, which you prescribed for me, for one of my uncles, who is also suffering from diabetes. He is very willing to try your prescription."

A phial of the medicine was sent but he was asked to discontinue the medicine. He saw me some months later at my place and gave me the whole

history of what had happened. I was quite pleased to listen to the good result he had derived from the use of the new drug. His urine was again analysed at my request and there was found only a trace of sugar present in the urine.

#### IV.

Jaharmull, aged 38, a Marwari by caste, a vegetarian, a strongly built person, merchant by profession, had been enjoying good health all along. Of late he suffered some loss in business and had to worry a good deal. Sleeplessness, failure of strength, profuse urination and intense thirst made him to seek medical help. He went first, as their own people do, to a country baid, who said he was suffering from simple weakness and gave him some stimulant and tonic. He continued it for some months. He was not much worse while he was taking the medicine, but he felt much worse when he discontinued the drug. He then sought medical help from an allopathic physician who gave him the usual preparation of opium (codein) and asked him to regulate his diet, but as all Marwaris are vegetarians, he could not very well change his diet except that he was asked to take butter, milk and skimmed milk, but no rice, no sweet and no potatoes. This kind of treatment he continued for some time without much benefit, but the quantity of urine and his thirst were lessened when he first began to take the medicine. In the mean time he was advised by his friends to come and see me.

About the end of August, 1916, he sent for me. On questioning him he gave the whole history of his case and told me he wanted to be well soon as his business had been badly suffering owing to his inability to look after it properly. It is customary or a habit with all Marwari patients or their relations to ask the attending physicians in all cases, how long the patient would take medicine and how long it would take the patient to get well. I was asked the same question. I distinctly said I could not say. However, he decided to be under my treatment.

I asked to have his urine analysed before I began his treatment. The report of the analysis on the 30th. of August, 1916, was as follows :—there was no other abnormality except the presence of 36.3 grains of sugar to the fluid ounce of urine he passed daily and the sp. gr. was 1040. He had excessive thirst, constant dryness of the mouth, drinking large quantities of water each time and passing a profuse quantity of urine, some 14 or 15 times in 24 hours, each time about half a seer. Sleeplessness or rather disturbed sleep partly due to his getting up several times at night, great weakness of both body and mind, loss of flesh, feeling of languor with no desire for any active work.

I gave him Acid phos. 200, one dose, on the first day, thinking the disease had been caused by the shock for his loss of business and grief for it, and Placebo 3 times daily for three full days. He came to me again when the medicine was exhausted. I gave

him this time Acid phos 30, one dose daily and Placebo two doses daily. These powders did him some good and he was asked to continue the same for another four days. He was still better and repeated the same medicine without consulting me. However, he was not able to take the medicine for some days. His absence made me think that he had left my treatment. All on a sudden he made his appearance before me again. He told me he had been unable to come to me on account of some pressing work and was as bad as he was previous to his using my medicine. This time I put him under *Abroma Augusta*, one drop-dose, 3 times daily. He continued this for one week and reported to me that he was feeling much better. I asked him to take the medicine only twice daily. In another week he said he was very much better. I requested him to have his urine analysed and report of the analysis on the 18th day of his using the drug was more satisfactory than I could think of; sugar merely a trace and the sp. gr. 1020. He then took a dram of the tincture and said "I know now how to use it." I then lost sight of him.

I can add any number of cases to the testimony of this drug in cases of diabetes.

In conclusion, I want to say that I have treated a number of cases of diabetes mellitus and incipidus and also cases of carbuncle with this drug with very satisfactory results. To my mind it is one of the best drugs we possess in diabetes.

D. N. ROY, M. D.

## DISEASES OF THE EYE.

By P. C. MAJUMDAR, M. D.

### CONJUNCTIVITIS.

This disease of the mucous membrane of the eye is of frequent occurrence and all such diseases are infections. If the pus from a diseased eye gets into a healthy eye, it becomes infected. Many a time this disease occurs in an epidemic form.

There are many kinds of conjunctivitis : (1) catarrhal form, (2) purulent, (3) granulous, (4) diphtheratic and (5) phlyctenular. But all these forms are practically the same and appear in the same way. In the first stage it is merely congestion which leads on to catarrhal inflammation of the mucous surface and subsequently assumes a purulent form. Simple forms of the disease are not of much consequence, but by neglect and some other internal causes it becomes dangerous, even the eye may permanently be damaged. The cornea may be involved and the sight lost for ever.

Eye is swollen, red and painful. The first symptom noticed is a feeling of sand in the eye, then burning, itching and lachrymation follow. Eye is red and swollen, there is matter in the eye which is agglutinated, especially at night. It is caused by cold and in some cases from injury of the eye. This is the simple catarrhal inflammation.

**Treatment** — The treatment of this form is very simple. A few doses of Aconite 3x, three or four times a day, are quite sufficient for a cure. But if it goes on increasing, eyes become red and painful, and

photophobia with intense headache begins, Bellad is the remedy. But if the catarrhal symptoms are more prominent, there is watering of the eyes and nose and constant sneezing, Euphrasia should be given. If the disease is aggravated at night, more pus is oozing out, Mercurius should be selected. We have been able to cure most of our cases with the above remedies.

If the disease assumes a chronic form and copious pus is present, Hepar sulph is to be selected. If the patient is subject to cold and catarrh and very sensitive, Hepar s. helps best. If the eyes are very much swollen, red and painful and if the pain is of burning and stinging character, Apis is our great help. Sulphur is the next best remedy in the chronic form of the disease and if the indicated medicines fail to act. Arsenic is one of our best remedies in the catarrhal form—burning in the eyes and nose, much watering and sneezing, warm fomentation relieves &c.

*Purulent form* of the disease is more dangerous. If cleanliness is not strictly enjoined and the disease is otherwise neglected, the eye may be lost. It may be gonorrheal and scrofulous ; so best hygienic measures should be adopted and antisycotic remedies selected. Here also Merc. sol and cor and Hepar s. are the best remedies.

*Ophthalmia Neanotorum* affects babies and little children. Great care is necessary for cleanliness and medication, otherwise the eye is lost very soon. It is often caused by leucorrheal or gonorrheal matter.

In the treatment of this affection Mercurius is very



useful. Bryonia and Rhustox may be of service, but we get better help from Argent nit. If pus is profuse and the eyes are red and œdematous, it is of signal success. If the eye remains affected in the same way and is not benefited by the above remedies, we must seek carefully the internal causes of the disease and treat accordingly. Pulsat, Silicea, Calc c, Ferrum and Iodium are some of our constitutional remedies. Food must be nourishing, and living in well ventilated rooms and extreme cleanliness must be adhered to. Dust of the street and glare of the sun should be avoided.

#### PTERYGIUM.

Unnatural growth of the tissues of the conjunctivæ and its surroundings is called Pterygium. When it grows big, it covers the cornea and blindness is the result.

**Causes and Symptoms** Dust or any other irritating substances getting into the eyes and frequent inflammation of the conjunctivæ are the causes of this disease. When fleshy growth is not extensive, there is no fear. But when it is more or less extensive, sight may be lost. We cure such cases frequently by medicine or a slight surgical interference causes it to disappear.

**Treatment.** Zincum and Argentum nit. are two very efficacious remedies in our hand. We have been able to cure most of our cases by either of these medicines in the 30th potency. When the growth takes place rapidly and they are unable either to cure or arrest, Ratanhia 3x internally and mother tincture, ten drops in an ounce of water, applied externally once

a day, will have the desired effect. Calc carb is also a very efficacious remedy in pterygium, if it is caused by cold or frequent conjunctivitis. Higher potencies and infrequent repetition are the best.

#### KERATITIS. INFLAMMATION OF CORNEA.

Inflammation of cornea is of frequent occurrence and is the cause of loss of sight in many persons.

**Cause.** This may be caused by extension of inflammation from conjunctiva. In purulent conjunctivitis the pus from it gets into the cornea and inflammation is set up. Scrofula and syphilis are also the frequent causes of it. In many debilitating diseases, such as cholera, typhoid fever &c., cornea may be easily involved. Very frequently opacity of cornea and staphyloma are the results of corneal inflammation and in all this loss of sight is the consequence.

Eyes become red and swollen, constant tearing in the eye and photophobia. Pain is felt more at night. Keratitis may be of four kinds—(1) suppurative, (2) vascular, (3) phlyctenular and (4) interstitial.

**Treatment.** In the beginning a few doses of Aconite or Belladonna is all that is required to cure. But when it involves the deeper surface, Merc sol should be given. In less severe cases Hepar s. is our help. Apis and Arsenic are to be remembered in the interstitial form. Special indications are given below.

*Aconite*—from injury or cold, fever and restlessness; much pain.

*Apis*—stinging and burning pains, much swelling and heaviness of lids, chemosis.

*Aurum met*—disease from syphilis or scrofula ; mental symptoms are to be depended on.

*Argent nit*—from conjunctivitis, much swelling and thick pus. Higher potency is the best.

*Arsenic*—frequent watering, burning and photophobia, pains aggravated at night, better by warm application.

*Calc c*—in scrofulous disease, especially in young children and debilitated persons.

*Hepar sulph*—many cases are cured by this medicine, especially from cold. Copious pus. In hypopeon we get more benefit from *Hepar s*.

*Merc sol*—in superficial ulcers, inflammation and more frequently in pustular and phlyctenular form of the disease. Intense pain at night, copious pus and corroding swelling of the eyes. If *solubilis* is not sufficient, *Merc cor* will help.

*Pulsat*—painless disease, pus copious, aggravation indoors and in the evening.

*Rhustox*—from cold or wet, superficial ulcers.

*Sulphur*—pain as if splinters or needles were put in ; morning aggravation and in chronic cases.

For opacity of cornea—*Clac. c.*, *Cannabis*, *Causticum*, *Hepar s.*, *Nitic acid*, *Sulphur*.

For staphyloma—*Apis*, *Calc c.* *Euphrasia*, *Lycopodium*, *Sulphur*.

(To be continued.)

## AN EXPERIMENT WITH CANTHARIDES ; ITS HOMEOPATHICITY TO BURNS.

By Albert E. Hinsdale, A. B., M. D., Materia Medica  
Research Laboratory, Ohio State University.

Cantharides has been mentioned by many writers of our school, especially the materia medicists, as a remedy for burns. Its use in this connection was doubtless recommended because of the close resemblance between the skin effects of this medicine and the pathology incidental to exposure to heat. In fact, the pathology caused by cantharides and burns may be, and often is, of a greater degree than that of a mere similarity ; the two conditions may be identical.

This being true, cantharides is homeopathic to the effects of high temperature. However, burns of the first degree—the kind for which this medicine has been recommended—often heal with little or no treatment and are, in a measure, self-limiting conditions, so, as yet, we have been in want of any definite proof to offer that the medicine really hastens or assists the healing process to take place over what would normally and without aid occur.

As a means of determining this point, we adopted the methods of S. J. Meltzer, who studied the "Application of a Concentrated Solution of Magnesium Sulphate to Burns and Scalds." This article with full particulars appeared in the Journal of Pharmacology and Experimental Therapeutics in November, 1913. In brief, his method is as follows :

The experiment was made on non-injured and non-shaved rabbit's ears. The animal was stretched out on a level surface with the head elevated so that glasses containing solutions could be placed under the ears. Deep anesthesia was produced with paraldehyde, following which both ears were submerged for a short period in hot, sterile tap water. Then the water was removed and one ear was submerged in a 1% solution of non-alcoholic cantharides, made up in sterilized tap water. (10 c. c. of the homeopathic tincture of cantharides was evaporated, at a very gentle heat, to  $3\frac{1}{2}$  c. c. and 1 c. c. of this was added to 100 c. c. of sterilized tap water.) The other ear was submerged in a 75% solution of sodium chloride. The ears were immersed in these solutions for two hours.

The temperature of the water used to produce the burns was  $62^{\circ}\text{C}$ . and the time of the submerging was of two minutes duration. As Mr. Meltzer states :

"It was found that the inflammations brought about by water of a temperature less than  $56^{\circ}\text{C}$ . were too insignificant to permit a statement as to the effect of  $\text{MgSO}_4$  ; the difference between the two ears was too small and the recovery was fairly rapid and complete in both ears. A submersion in water of a temperature above  $63^{\circ}\text{C}$ ., for a three minute duration or over, brought out such a degree of burn, with a subsequent destruction, of the submerged part of the ear, which did not permit the drawing of a definite conclusion as to the retarding effect of the submerging in magnesium sulphate solution. (It should be noted here that

during the submersion of the ears the temperature of the water becomes fairly rapidly reduced.)"

The experiment was performed on three healthy rabbits with results as follows :

At nine-thirty A. M., January 13, the first rabbit's ears were submerged in hot, sterile water as stated above, after which the left ear was placed for a period of two hours in the solution of cantharides and the right ear in the sodium chloride solution. Immediately following the two-hour period, the cantharides ear showed a slight reddening, as did the other ear, but the latter was two or three shades darker. At four P. M., the same day, the sodium chloride or right ear showed some desquamation on the inner side. The other ear showed none. Practically no differences were noticeable in the ears treated. They appeared about normal. There was little evidence that the heat had produced any changes.

On January 14, at seven-thirty A. M., the right ear showed, on its inner edge, a large blister,  $1\frac{1}{2}$  inches long and  $\frac{1}{2}$  inch wide. Two smaller blisters were also noted. The left ear appeared normal and showed no blisters. The right ear also felt very hot as compared with the left ear. The left ear also stood in a more erect position.

On January 15, at eight A. M., the ear treated with cantharides appeared normal while the sodium chloride ear was the same as on the day previous, with the exception that the blisters had broken.

Two other experiments performed in exactly the

same manner gave results practically identically with those of the first. One of the rabbits was kept alive for several weeks and, one month after the experiment was performed, the ear treated with cantharides was normal in almost every particular. Only the slightest evidences of the injury were to be detected. The ear treated with the salt solution had sloughed to the extent of two-thirds of its length, leaving a stump which had healed by first intention.

It thus appears that cantharides, when locally applied in dilute solution, immediately after exposure to a moderate degree of heat, is capable of preventing, to a very great extent, the pathological results of burns of at least the first degree. This effect is undoubtedly homeopathic in character and verifies in a scientific way former statements made with reference to the treatment of burns with cantharides. The clinician can with confidence treat burned surfaces with this drug, knowing for a certainty that the remedy will be effective, that the healing process will take place more quickly with its use than without it and that the results are not due to psychical suggestion or to an unaided, natural process of recovery.

Laboratory experimentations, however interesting and spectacular, must stand the test of clinical verification else they are without value. Several clinicians have used this treatment with excellent results, since the experiments were performed, and have assured the writer that the findings possess real therapeutic value. I do not mean to infer that there are no other

remedies for burns but I have tried to bring out the point that cantharides is an excellent treatment for the condition and that its use in this connection is another illustration of the universality of the law of cure.

1906 North High Street.

#### DISCUSSION.

*Dr. J. Richey Horner, Cleveland :* Dr. Hinsdale is doing very interesting, very thorough and very important work in the little laboratory which he controls at Ohio State University. The students do the work under his direction. Through the activity of Dr. T. A. McCann, there will soon be a laboratory devoted to homeopathic research. The management of the College of Homeopathic Medicine is under the control of five or six young men. We are proud of the work they are doing.

*Dr. R. F. Rabe, New York City :* If we are to command the attention and respect of scientific men in general, we must engage in this research work, including work not only upon animals but upon humans. I know that this work is being done in Columbus and is being done exceedingly well and I know that it is being done in Philadelphia by Dr. Haines and Dr. Griggs. It has also been done to some extent by Dr. Dewey of Ann Arbor. We in New York, have done very little, excepting for the remarkable proving of thyroïdin by Dr. Gillingham. That proving was a marvel of its kind and will be published in the Institute JOURNAL.



*Dr. J. H. Wilms, Cincinnati, Ohio :* This experiment of Dr. Hinsdale's is one of the most remarkable experiments we have had in the homeopathic colleges, in that it shows that we can do experiments without special laboratory equipment, in the kind of laboratory that all of you can have in your back yards. I believe the day will come when every physician will have an animal or two on which to experiment. There is nothing that stimulates thought so much as vivisection.

This experiment, if proved clinically, will save a great deal of suffering. I do not know of any treatment of disease that so shows the fallibility of the judgment of surgeons and physicians, as the treatment of burns. I saw the heads of these animals when I was in Columbus. The ear treated with cantharides showed practically no changes and the other had dropped off. This paper should be given special attention.

*Dr. G. E. Dienst, Aurora, Illinois :* Those of us who practise in the country and around factories find cantharis one of the best remedies for burns. One dram of cantharis tincture mixed with the white of a raw egg and placed over a burn, will relieve the pain of the burn and will stimulate healing more quickly than anything I know of. But if you are a little late, if pain is continuous and if suppuration is threatened, cantharis will do for you more than anything except causticum. I have noticed that burns received in factories and those from mustard gas heal very

quickly if one of the two drugs, cantharis and causticum, is taken internally.

*Dr. C. F. Junkerman, Columbus, Ohio*: I can verify the use of cantharis if the remedy is given immediately. *Urtica urens* has also been of great value in the treatment of burns.

—*The Journal of the American Institute of Homeopathy.*

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## THE USE OF THE X-RAY AT THE BEDSIDE IN THE HOME

By J. Campbell Howard, M. D., Formerly  
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New York City.

An x-ray equipment that can be carried to the home and used to make plates of good quality has been the subject of much experimentation and rather indifferent success until recently. Nearly all the machines were made with the induction coil, and this required an interrupter and valve tubes. All this became quite bulky and was not very satisfactory.

Since the United States entered the war the army bedside unit was developed. This operates with the newly discovered self-rectifying radiator type of Coolidge tube. Previously it was impossible to operate a transformer without a rectifier. This tube, however, being self-rectifying dispensed with this necessity. The army bedside unit therefore is virtually a small transformer about 12x8x8 inches, operating a self-rectifying tube. The case, however, is rather larger than necessary and weighs more than

the operating parts. So it is actually not a portable machine, as it is too heavy for two men to carry up and down stairs. It can be rolled, however, to any part of a room or floor and used by simply hitching a plug into the electric light socket.

Recently several concerns have put out a similar machine, less bulky than the original but still not portable. They can be rolled on wheels but not carried. Shortly, however, I believe there will be developed a suit case variety of this machine which can be carried up and down stairs by one man. The combined weight will be less than sixty pounds, and while this may not handily be carried far, nevertheless it will be possible to bring it into any home.

The machine is able to take any part of the body, as has already been demonstrated by the army bedside unit. Furthermore the fine focus point of the tube gives a better detail to the plate than the large tubes combined with a high power machine. The army bedside unit was used in all army hospitals to examine pneumonia and empyema cases and follow them through their course. The results have been surprisingly and uniformly good. Those doctors who have been in service have been surprised what a large amount of information can be obtained from a series of pneumonia or empyema examinations taken at two or three day intervals.

(To be continued.)

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